

RB.B

3e

PROVINCE OF BRITISH COLUMBIA

THIRTY-FOURTH REPORT

OF THE

PROVINCIAL BOARD OF HEALTH

INCLUDING

NINETEENTH REPORT OF MEDICAL INSPECTION OF
SCHOOLS, YEAR ENDED JUNE 30TH, 1930



PRINTED BY
AUTHORITY OF THE LEGISLATIVE ASSEMBLY.

VICTORIA, B.C. :

Printed by CHARLES F. BANFIELD, Printer to the King's Most Excellent Majesty.
1930.

RBB/3 e



Presented by

The Provincial Health Officer

January 1930



22501404931

PROVINCE OF BRITISH COLUMBIA

THIRTY-FOURTH REPORT

OF THE

PROVINCIAL BOARD OF HEALTH

INCLUDING

NINETEENTH REPORT OF MEDICAL INSPECTION OF
SCHOOLS, YEAR ENDED JUNE 30TH, 1930



PRINTED BY
AUTHORITY OF THE LEGISLATIVE ASSEMBLY.

VICTORIA, B.C. :

Printed by CHARLES F. BANFIELD, Printer to the King's Most Excellent Majesty.

1930.

WELLCOME INSTITUTE LIBRARY	
Coll.	
Call No.	Annie Key WA28
	.G.C2
	B 86
	1930

PROVINCIAL BOARD OF HEALTH,
VICTORIA, B.C., December 1st, 1929.

To His Honour ROBERT RANDOLPH BRUCE,
Lieutenant-Governor of the Province of British Columbia.

MAY IT PLEASE YOUR HONOUR:

The undersigned has the honour to present the Report of the Provincial Board of Health for the year ended June 30th, 1930.

S. L. HOWE,
Provincial Secretary.



Digitized by the Internet Archive
in 2019 with funding from
Wellcome Library

<https://archive.org/details/b31411940>

REPORT of the PROVINCIAL BOARD OF HEALTH.

PROVINCIAL BOARD OF HEALTH,

VICTORIA, B.C., December 1st, 1930.

The Honourable S. L. Howe,

Provincial Secretary, Victoria, B.C.

SIR,—I have the honour to submit the Thirty-fourth Annual Report of the Provincial Board of Health for the year ended June 30th, 1930.

The Annual Report of the Provincial Board of Health is primarily engaged in reporting the statistics of communicable diseases which come within the purview of the Department, and, by comparing the number of cases as reported from year to year, gauge the results of the work of the Board. This is the general conception that the public has of our work, but as we progress we have endeavoured to show the public that the number of cases of infectious diseases reported is more a criticism of, not the Department, but of the conduct of the community itself in regard to their non-observance of the law of the land.

Our whole effort has been directed along the lines of the awakening, in the public conscience, of a sense of their responsibility, and that the results from the enforcement of the health laws can only be brought about by co-operation on the part of the public. Governments may make laws, but they can only keep a step or two ahead of what the public desires, and to get at the desires of the public necessitates a long-continued propaganda in an effort to educate them to their responsibilities. I am pleased to say that during the past few years there has been a remarkable awakening of the public conscience in this matter. They are beginning to realize what the individual as regards his relation to the community means, and as regards the efforts he must make individually in the prevention of disease by attention to personal hygiene, the education of himself and others in the idea of the prevention of disease as distinct from its cause. The inculcation of this idea has been our aim, and our efforts have been to create a broader outlook by the health-work as carried on by the Government.

Formerly it was the highest ambition of public-health workers to show each year a diminished morbidity and mortality rate from certain named diseases. If the Public Health Officer could show that in a brief period of his incumbency he had cut the typhoid death-rate down to one-fifth of its former proportions and had a steadily diminishing rate for scarlet fever or diphtheria, he felt that he had done a great deal. But within the past few years we have had a higher ambition. We have felt that we must deal with more than the negative side of health, and that it was most distinctly within the province of a Health Officer to put forth every effort to raise the vitality of every human unit in his community to the highest point of efficiency. He must no longer be satisfied with the knowledge that from the result of his efforts a number of individuals have survived who might have died from some preventable disease, but he must also feel that he must lay a foundation for the robust citizens of to-morrow, and so our ideals have advanced, taking in not only the previous field of sanitation, but also that of personal hygiene.

How to reach the individual, however, has been the problem. Health Officers could not personally supervise the daily life of each individual in the community, and he recognizes, therefore, the necessity for educational measures, directed both to the end of securing better understanding, and hence better support to the Health Department, and also to so educate the individual as to furnish him with the knowledge of how to promote his individual health and with the incentive to put that knowledge into effect.

That we are accomplishing our purpose is largely due to the fact that a sufficient number of the citizens have become thoroughly interested, and through them, as individuals, organizations have been reached, and public-health work in British Columbia is able to show milestones of progress from year to year.

The greatest advance which we have made is to be noted in the establishment of full-time health units. We have now, in British Columbia, six, and for three of these we are indebted to the Rockefeller Foundation for financial assistance. I would refer you to the report of the Medical Health Officer published in the school division in this Report, as it is evidence of what has been accomplished at Saanich. The school report from Kelowna gives an itemized

account of the public-health work as carried on by the Public Health Nurse under the Medical Health Officer, and is most comprehensive.

The work preceding the establishment of these units was wearisome, to say the least of it, but by concentrating on some points of the districts, where we were endeavouring to establish the unit, produced its results, and during the past year what has been accomplished has verified all our predictions and has satisfied the local authorities that they have made a really worthwhile investment.

The Municipal Councils appreciate the great falling-off in the costs of the health-work as carried on previously, and the satisfaction of the parents in regard to the examination and management of the school-children, while they cannot be evaluated in dollars and cents, is a sure indication that these units are upon a permanent basis.

I would suggest that any one reading our Report would turn to the pages where we deal with the school-work, and the account of the results obtained, and particularly the outline of the work as being carried on, will be illuminating.

The establishment of a full-time Medical Health Officer results in his being surrounded by a useful organization, and the influence of a competent man on the job, just as in any other business, is rapidly reflected in better water-supplies, increased sewerage facilities, better protection of milk and food, with resulting lower mortality rates.

There is also a great co-operation from the medical profession. Where part-time men are employed as Medical Health Officers the disadvantages are very apparent. As a rule, the part-time Medical Health Officer has no training in public health, except what he gains by experience; often he loses practice in cases of communicable disease; people find that they are "shut in" by the Medical Health Officer, but may escape if the case is seen by another doctor. Physicians are singularly reluctant to report cases of communicable disease to one who is in competition with them in practice. All these factors—the poor pay, want of co-operation, lack of educated public opinion, and, above all, lack of funds—contribute to render a part-time health service of little value to the community.

We have made a good beginning in British Columbia in the establishment of these and are carrying on the educational work.

INFECTIOUS DISEASES.

In regard to infectious diseases, there has been a much more marked falling-off in the number reported than last year.

Diphtheria is a third less; there were about 1,600 cases of mumps, as compared with 4,260 the year before; measles shows a 50-per-cent. reduction in the number of reported cases.

In regard to scarlet fever, I can quote from a speech made by a local physician at the congress of teachers at Kelowna, when he says:—

"Our pupils have been exceptionally free from epidemics during the year. Just one disease—namely, scarlet fever—for a couple of weeks threatened last autumn to break out, but prompt methods of isolation of the affected ones, close subsequent observation of all contacts, and inoculation of the vast majority of the pupils against the disease who showed by the Dick test a sensitiveness to scarlet fever, enabled us to escape with only seventeen cases in all. This was very creditable and very fortunate, as in a city to the south of us the schools were all closed for weeks, and scores of cases of scarlet fever occurred."

In Kelowna scarlet fever has been a very prevalent disease, but in 1929 immunization was carried out and 1,050 children were immunized, and at the beginning of 1930, 797 children were immunized. There occurred twenty-three cases of scarlet fever in Kelowna and district, all in children who were not immunized on account of refusal of the parents to do so. None of the children, who were not immunized on account of a negative Dick test, fell ill with the disease.

This is being followed in Kelowna by immunization for diphtheria, which was begun immediately on the opening of the schools in September. Slips were sent to the parents asking for their consent, and 85 per cent. of the slips were returned asking that the immunization be carried out. We attribute this splendid result to the fact that the public recognized that scarlet fever had been practically wiped out in the district owing to the immunization against it. We are receiving splendid support from the public.

Vaccination against smallpox is being carried out in the face of much opposition from our good friends the anti-vaccinationists, and we are pleased to report a decided falling-off in the cases of smallpox—from 738 last year to 157 this year.

There were forty-two cases of poliomyelitis reported, with six deaths, as against 116 cases last year. We were very fortunate in this respect.

It is to be noted that, with the improvement in our epidemiological branch during the past year, the cases of contagious diseases were very much better reported, and consequently the decreases this year, in view of the better reports, mean a great deal more than simply noting the difference as between the number of cases reported in both years.

It is a splendid indication that, in spite of our "anti" friends, the people are recognizing more and more, from our closer contact with them and our educational campaigns, the remedy for epidemics lies in their own hands.

During the early part of this year the public press were reporting, particularly in California, the development of a number of cases of psittacosis, which is an infectious disease transmitted through parrots. The crews of ships from the Orient make a business of bringing over birds in an effort to make a little money, and these are sold to various people at the points of landing.

In March two cases were reported by Dr. Ridewood, of Victoria. This was followed in April, 1930, of a report by the Medical Health Officer of Burnaby, Dr. McIntosh, on the Mainland, of seven cases. A number of people became infected and we had to request the Federal Government to place an embargo on the landing of these birds. This was done immediately, at the request of the Provincial Government. After the embargo came into effect there were no further cases shown.

Dr. Chisholm, our Epidemiologist, reported fully, and copies of his report were sent to the United States authorities, who had shown a great interest and assisted in a most courteous manner in our attempts to control the condition.

TUBERCULOSIS.

As regards tuberculosis, we have a slight falling-off this year in the number of cases reported. At the same time, we are seriously concerned with the question of T.B.

When consulting the figures, in the report of our Travelling Diagnostician, for T.B., the large Indian population, the fact that the climate in our Province invited demobilization of our army, a privilege which was granted by the Government, which accounts for 400 cases at the Sanatorium, all must be taken into consideration. Further, the climatic conditions induce many people who are affected to come to British Columbia.

In discussing this matter with the Superintendent of our Sanatorium, I asked if he would give us suggestions as to such changes that might be brought about to enable us to assume a larger control of the incipient cases. People suffering from the disease will not go to the Sanatorium until too late. The result is that we have many advanced cases there that should not be in the institution at all. While we recognize that an advanced case in the home is a great menace, yet under the scheme which has been suggested these advanced cases would have to be taken care of by the local hospitals, and we would concentrate our work on an educational programme. Dr. Lapp, the Superintendent of the Sanatorium, reported as follows:—

"It is quite apparent, from the high death-rate and the long waiting-list for admission to the Sanatorium, that more active and vigorous methods should be adopted to deal with tuberculosis in the Province.

"Under the present arrangements, only a small percentage of the active cases can receive treatment at the Sanatorium. Many of these remain for long periods (from one to several years), becoming homeless while there. They also lose all ambition and gradually become more and more discontented and unappreciative of the costly care and treatment provided for them. Those patients who are kept waiting for admission have had no training in the proper methods of treatment. Therefore they usually become worse and are often in the incurable stage by the time we are able to admit them. This is not true of Tranquille alone, but all large Canadian sanatoria have the same experience.

"There are two ways in which the situation may be met. The first, a very expensive way, would be the building of more and more Sanatorium accommodation to admit all diagnosed cases

and provide long periods of treatment. The other is not so passive and much less expensive. It is the limitation of the stay of all patients in the Sanatorium and the establishment of a Field Service sufficient to supervise all patients and contacts before and after their period of Sanatorium education. I feel convinced that the latter is the method which will do the greatest good to the greatest number and would strongly recommend that such a plan be put in operation at an early date.

"I recommend this plan for your consideration because it involves no capital expenditure, promises to produce the quickest return, and can be dropped at any time if it is not found to be satisfactory. It should postpone the need for additional Sanatorium beds for a long time, reduce the cost of treating each patient, shorten the period of treatment, and be of great educational value.

"Briefly, the plan is to create a new department at the Sanatorium to be known as the Field Service Department, and the Sanatorium would become the centre of all Government anti-tuberculosis activities. The Medical Superintendent might be called the Director of Tuberculosis Work. It is most important that the Sanatorium and Field Service work be under one direction, so that uniform policies can be formulated to guide the patient, both in the Sanatorium and in the home.

"The Field Service Department would be composed of a central office at the Sanatorium, in charge of a competent Public Health Nurse with tuberculosis training, and extension clinics and visiting nurses working out from the Sanatorium.

"Each clinic would be composed of a doctor and a nurse. They would require a portable X-ray outfit. They would work with the family doctor, diagnosing new cases, examining contacts, studying home conditions, and advising about treatment while the patient was in the home. A visiting nurse for each district should supplement the work of the clinic. To give adequate service the Province should be divided into districts of such a size that one clinic could cover a district each month.

"Instead of being, as at present, a resthaven for a few of the tuberculous, the Sanatorium would become an educational centre and a much more active institution than at present. All newly diagnosed cases would be sent to it for a period of education and treatment varying according to the particular needs of each. No patient would be kept in the Sanatorium for more than four to six months unless some special treatment made it advisable.

"After the period of education and treatment at the Sanatorium the patient would be returned to the home, where he would continue treatment under the guidance of the field-workers. During the time the patient was in Sanatorium the people at home would be advised regarding preparations for receiving the patient back. The Sanatorium officials would be familiar with home conditions and therefore in a better position to advise the patient.

"Other advantages of this plan would be: First, the amount of valuable data which could be gathered by the field-workers; second, a great many more people would assume their responsibilities towards the sick members of their families; third, an increased revenue for the Sanatorium would result from the investigations of the field-workers; and also from the knowledge that treatment in Sanatorium would be necessary for a few months rather than a few years.

"The cost of such a plan would depend on the number of clinics necessary. I believe that three clinics could do the work. The cost of each clinic, including salaries and expenses of the doctor and two nurses and the X-ray expenses, would amount to about \$13,000 per annum. It is already costing the Government over \$6,000 for the inadequate service provided by one clinic, so that the increased cost would not be more than \$35,000 at the most. This is very cheap compared with the cost of providing more beds. Fifty beds would mean a capital expenditure of at least \$125,000 and an annual maintenance of \$50,000, and would do very little towards dealing with the tuberculosis problem.

"Under present conditions we can treat at the Sanatorium only 330 patients. Estimating conservatively by standard methods, there are over 2,000 active cases of tuberculosis in the Province. Also under present conditions 330 patients are reaping the entire benefit of the Sanatorium. The remainder of the active cases, whose need is just as great, do not get any chance whatever which might come to them from a period of education and treatment in the

Sanatorium. This is most unfair. An institution designed to serve all the taxpayers should not be restricted to the few who, by good fortune, manage to gain admission and remain for indefinite periods because there is no other provision made for them. For the Sanatorium to do the greatest good for the greatest number it will be necessary to institute some plan whereby all diagnosed cases can receive the benefit of its education.

"This plan is not entirely new, as I find it is being successfully carried out in parts of the United States and a somewhat similar plan is to be instituted in the Maritime Provinces. An active field force is engaged in Saskatchewan chiefly in diagnostic work and gathering material for statistics. Saskatchewan provides more Sanatorium beds and does not stress home treatment. I favour home treatment, but only after a suitable period of education at the Sanatorium, and, I might add, only under skilled guidance.

"Now that I have a good, well-organized staff at the Sanatorium, I feel capable of assuming the duties entailed in directing this extra department which seems to me to be so necessary at the present time. I would recommend that it be given a trial for either three or five years and feel confident that the results would be very gratifying."

Accompanying our Report is a graph showing and contrasting the death-rates from tuberculosis and cancer. It may be noticed that the tendency of the cancer results is consistently upwards.

LABORATORIES.

In regard to our laboratories, we have arrived at the parting of the ways. We have been subsidizing two laboratories connected with our largest hospitals.

The public-health work has increased to where 58 per cent. of the work done in these laboratories is public-health work. The clinical side is suffering consequently, and the laboratories are not large enough nor sufficiently well staffed to meet this great increase. Consequently, a determination has been arrived at to establish a Provincial laboratory in Vancouver, our commercial capital, in which we hope that we will be able to look after the work of the City of Vancouver should such an arrangement meet with the approval of the city authorities.

In connection with the laboratory-work, vaccines and antitoxins are sent out free on request, and for the year ended June 30th, 1930, the following have been furnished: 8,955 points smallpox vaccine, 8,144,000 units diphtheria antitoxin, 2,855 doses diphtheria toxoid, 31 packages Schick test for diphtheria, 511 packages 2 c.c. (prophylactic) scarlet fever antitoxin, 219 packages 15 c.c. (curative) scarlet fever antitoxin, 166 packages Dick test for scarlet fever, 898 doses scarlet fever toxin (for active immunization), 620 doses typhoid vaccine, 92,500 units tetanus antitoxin, and 23 packages 20 c.c. anti-meningococcus serum.

HEALTH UNITS.

We are pleased to say that we have had another unit established, under a most capable full-time Medical Health Officer, in the District of North Vancouver.

The progress and the work carried on at the points already established is being fully reported on in this Report, and I would suggest that they be read over carefully, especially by those in official positions who have the handling of the taxpayers' money.

Where we have established the units, the present expenditure is much below the cost of a most inefficient service which was being carried on previous to the establishment of the unit; that is, in actual money. The benefit to the health of the community, and particularly the benefits to the children, the decrease in the loss of school-time, and the reduction in the number of retarders in the schools, is hard to evaluate in dollars and cents, but these results are the most valuable contribution to the work.

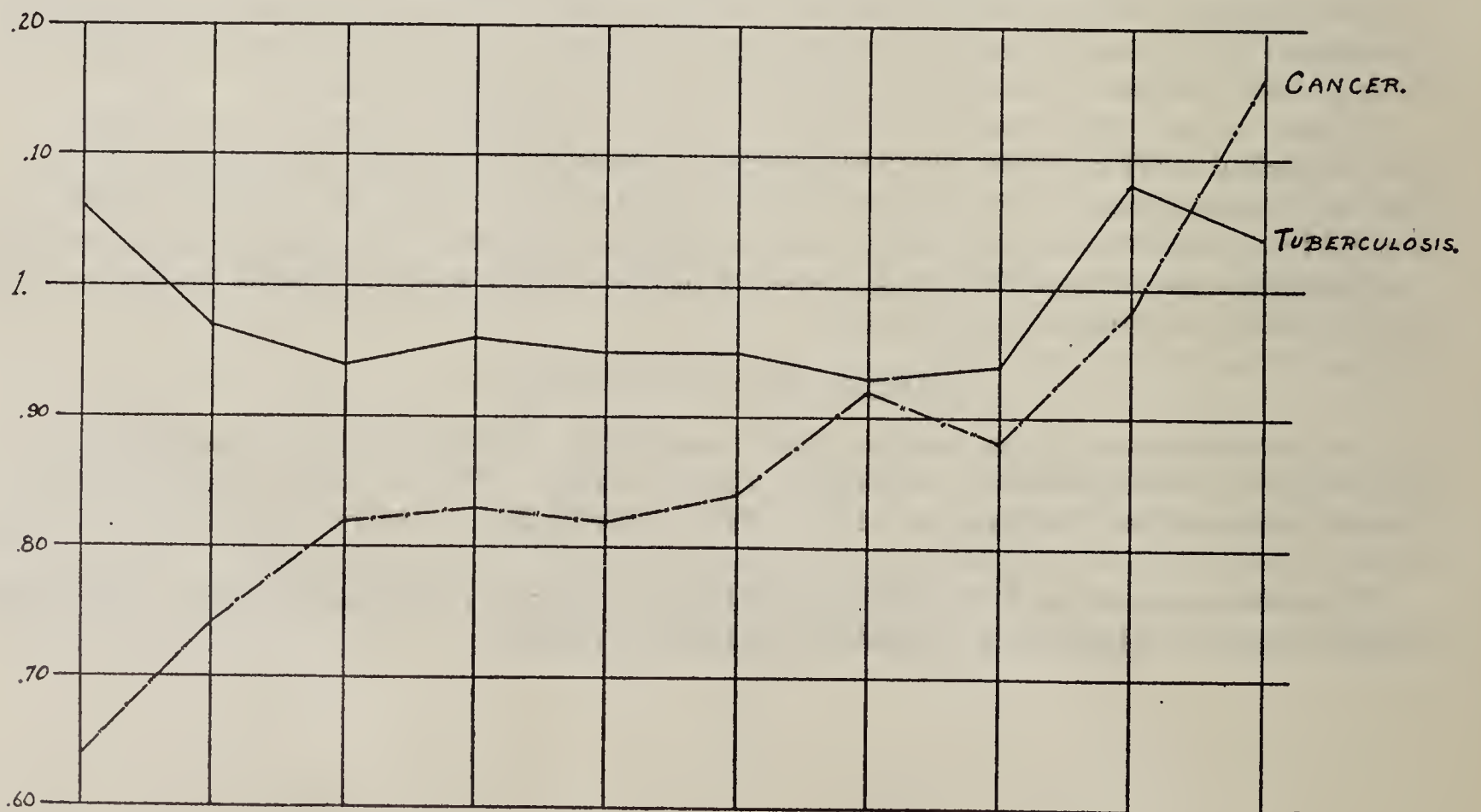
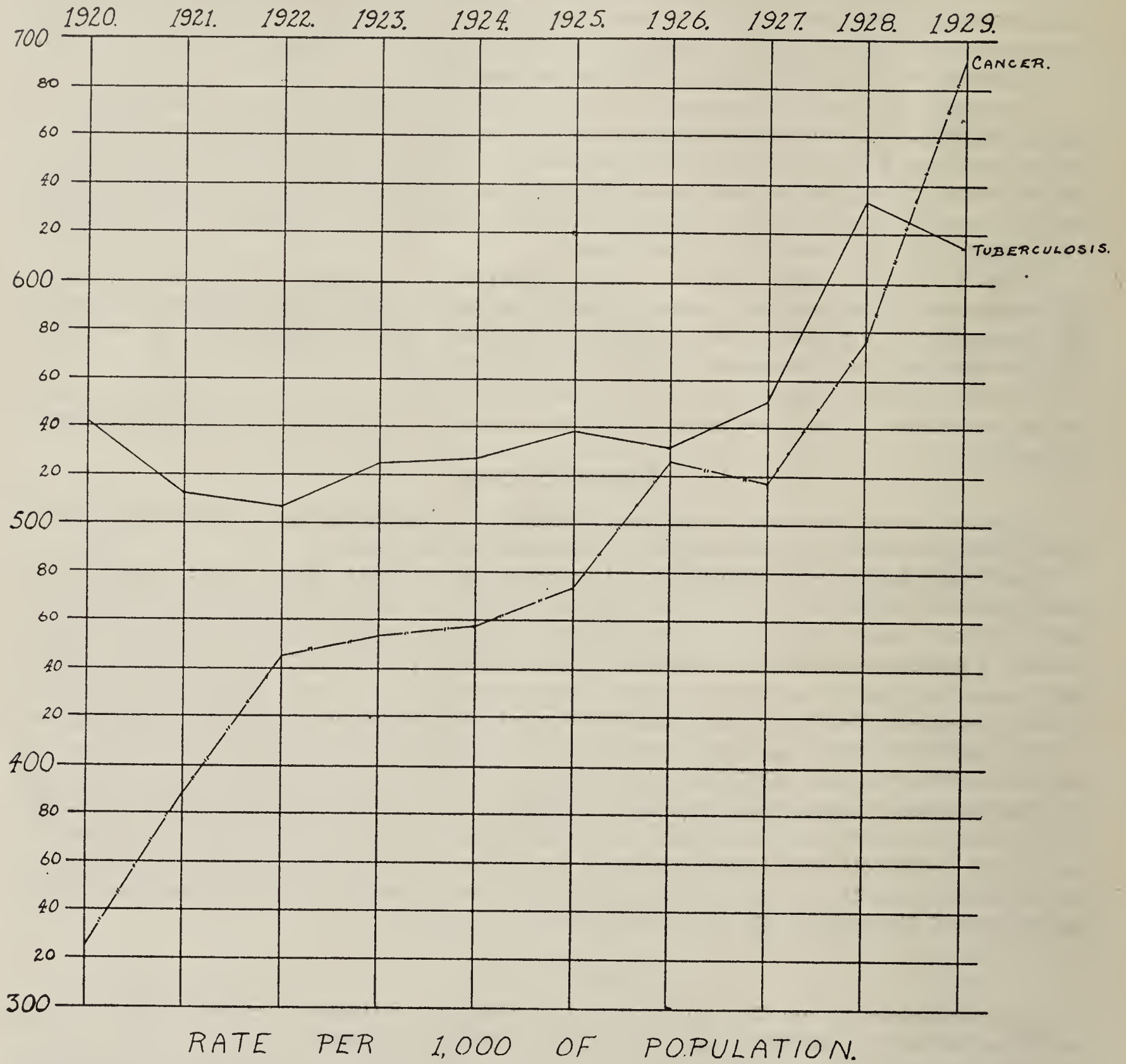
PUBLIC-HEALTH NURSING.

The establishment of the full-time health unit is the outgrowth of the educational work following the establishment of the Public Health Nurses. We now have thirty-two Public Health Nurses in the Province, in addition to the twenty-five or thirty School Nurses in the cities.

There is a class at the University graduating in the spring of 1931 of eighteen, and we feel confident that we will be able to place the majority of these.

CANCER AND TUBERCULOSIS IN BRITISH COLUMBIA, 1920-1929.

TOTAL DEATHS.



Our extension of the nursing service has been hindered by the fact that we have been unable to obtain nurses that come up to our requirements. Our one basic requirement in our public-health work is a trained personnel.

The nursing-work is carried on at present as a generalized work; that is, there is a certain amount of nursing visits to people, but the nurse does not go in her capacity as a nurse, other than to advise; she makes a call the same as a physician does, and the people are rapidly grasping the fact that the nurses are teachers—"public-health teachers" is what we prefer to call them.

I am including in the Report the report from the Kelowna Health Unit, submitted by Anne Frances Grindon, R.N., nurse in charge, and it will in a general way give the basis of our work in the schools.

We are incorporating a graph in this Report showing infant mortality rates in each Province and the Dominion. British Columbia has a very enviable position during the past ten years, as having the lowest infant mortality rate in the Dominion of Canada.

VENEREAL CLINICS.

Our venereal clinics are carrying on their work in a most satisfactory manner. Their real purport is being better understood by the people and we are producing markedly good results in rendering the syphilitic patients non-infective.

It has been ten years since we began the work in our clinics and the reduction in the cases in our mental asylums suffering from the after-effects of syphilis has been more than 50 per cent.; but the preventive side is a problem which requires very earnest work to bring about appreciable results.

As a result of the ten years' work, we feel that there has not been any appreciable difference made in the incidence of syphilis, and we believe that concentration of our efforts on treating and curing, or at least producing a non-infective condition, is our only hope for the future, to prevent the transmission of the disease. This may be read as an admission of defeat in regard to the results of prevention, but the question of prevention is so large and deals with the control of forces that we consider does not come within the purview of the Health Departments. Home influences and religious teaching are the means that would produce the greatest result in regard to prevention. The responsibility for effecting a change through these influences does not rest with the Health Departments.

Until the public realizes that venereal disease does not differ from any of the other infectious diseases, other than in the lasting effect which they produce, and should be treated as such and not considered something that should be referred to only in whispers, can we hope to produce any material effect in regard to prevention.

SANITATION.

With increased population, both permanent and transient, the work of this division has increased to such an extent that it is continuous the year round, without observance of holidays.

New industries to develop our natural resources have called for more field-work, and in this respect we are very fortunate indeed in the co-operation that we are receiving from the management of the larger companies, and also of the individual workers, in the appreciation of the fact of their appreciation of the value of good health as an asset in carrying out their work.

Briefly, our work comprises supervision of auto tourist camps, bathing camps, fruit-canneries, fish-canneries, oyster-beds, mining and logging camps, and nuisances, and there is included in this Report the Chief Sanitary Inspector's report of his activities during the past year.

Cemetery-sites approved.—Pemberton Meadows, Gellatly (private), and Harrop.

Sewage-disposal Systems approved.—Vancouver (extensions), Chilliwack City (extensions), Burnaby Municipality (extensions), Kelowna (extensions), North Vancouver City (extensions), and Oak Bay Municipality (extensions).

Water-supply Systems approved.—Vancouver (extensions), Cranbrook (extensions), Burnaby Municipality (extensions), New Westminster (extensions), Glenmore Municipality, Coquitlam Municipality (extensions), Quesnel, Nanaimo (extensions), and Oak Bay Municipality (extensions).

EDUCATIONAL.

Our educational efforts are carried out through a constant and increasing number of talks to different organizations, and this is supplemented by our bulletins and pamphlets on various subjects. During the year we have distributed 240,000 pamphlets.

We have constant requests for these, and we use every avenue of distribution possible, and in this connection, in reference to the advance of our work, I must express the Department's great appreciation of the co-operation that we are receiving from the Women's Institutes of British Columbia, of which there are 138 in the Province.

These institutes have made public-health work the most important branch of their programme and we are particularly pleased with the great interest they take in the work in the schools. The individual members of these institutes have many calls upon their time, but they have never varied in their interest nor in their co-operation with us in the health-work in British Columbia, and we consider that the advances that we have made are largely due to their interest, and what is particularly pleasing is the knowledge that this interest has never waned and our outlook for the future in this respect is very promising.

We are appending a full report of the Medical Inspection of Schools, and I think any one reading it will find it very interesting in the demonstration that we are able to give of the improvements and the splendid manner in which our nurses are handling the work.

In conclusion, Sir, permit me to express for myself and staff our appreciation of the co-operation which we receive from yourself, an interest that is based upon the idea of understanding the policies and details of the Department and lending to our success your help and encouragement, and I would especially recommend for your consideration my own appreciation of the splendid co-operation that I receive from the members of the staff. They have been with us for a number of years, thoroughly understand the details of the work, and devote not a perfunctory few hours a day, but an intelligent interest in the work that has been of great help to me, for I feel that without their co-operation I should have felt very much lost.

I have the honour to be,

Sir,

Your obedient servant,

H. E. YOUNG,

Provincial Health Officer.

GENERAL REPORTS.

SANITARY INSPECTION.

SANITARY INSPECTOR'S OFFICE,
VICTORIA, B.C., June 30th, 1930.

H. E. Young, M.D., C.M., LL.D.,
Provincial Health Officer, Victoria, B.C.

SIR,—I have the honour the present my Twentieth Annual Report on General Sanitary Inspection for the Provincial Board of Health.

During the past year this branch of the Health Department has found its most arduous duties that of dealing with nuisances, chiefly the result of industrial expansion adjacent to thickly populated areas.

Every good citizen encourages and shouts for more factories and pay-rolls until smoke and odour clouds his serenity; then the Sanitary Officer must abate it or be damned!

Our files have volumes to show where investors looking around for a site to start a tannery or other such factory are invited and welcomed by Trade Boards and citizens to locate in their midst; then after a season or so neighbours protest and petition for their removal because of smoke or smell.

Fox-farms, abattoirs, fish-oil and fertilizer factories seem to be the chief offenders, and it must be admitted are not desirable in a residential or business district.

Regulations are now being put into effect which will effectually check the trouble by reasonable isolation.

SUMMER RESORTS.

About 95 per cent. of the numerous British Columbia summer resorts are located in un-organized territory. Order and sanitation rest almost entirely upon the hands of our Police-Sanitary Officers. Every summer camp and swimming-beach has been well crowded this year and without break or trouble of any nature at these health resorts. This, of course, is the result of intelligent and cheerful co-operation on the part of our city visitors in quest of recreation and health.

LOGGING CAMPS.

The logging industry is not as active as last year, but all camps comply fully with our Industrial Camp Regulations. They are periodically visited by Provincial Police Sanitary Officers and reported upon to this Department. The camp of twenty years ago would not be tolerated by employer or employee to-day. The food supplied at industrial camps is equal to the best hotels and the sleeping accommodation superior to the average city lodging-house. No industrial strife exists in British Columbia to-day. We do not claim credit for such condition, but it is fair to assume that the enforcement of regulations for improved health conditions for the industrial workers must have had some part in the peaceful conditions now existing in our logging and mining camps, and also in our company towns, where the sanitary conditions are always commented upon most favourably by passing tourists or visitors.

FRUIT- AND VEGETABLE-CANNING ESTABLISHMENTS.

The majority of these establishments are located in sunny Okanagan. Our departmental regulations governing the operation of these canneries have proved to be satisfactory and the operators have co-operated most fully in observance. Train-loads of delicious fruit and vegetables are being shipped to growing and appreciative markets in Canada and overseas. This is undoubtedly the result of the excellence of flavour and care in packing and handling. Grown, picked, stored, and prepared with most exceptional climatic and sanitary conditions under Government supervision, it would indeed be difficult to predict the future for such a desirable and favoured food.

FISH-CANNERIES.

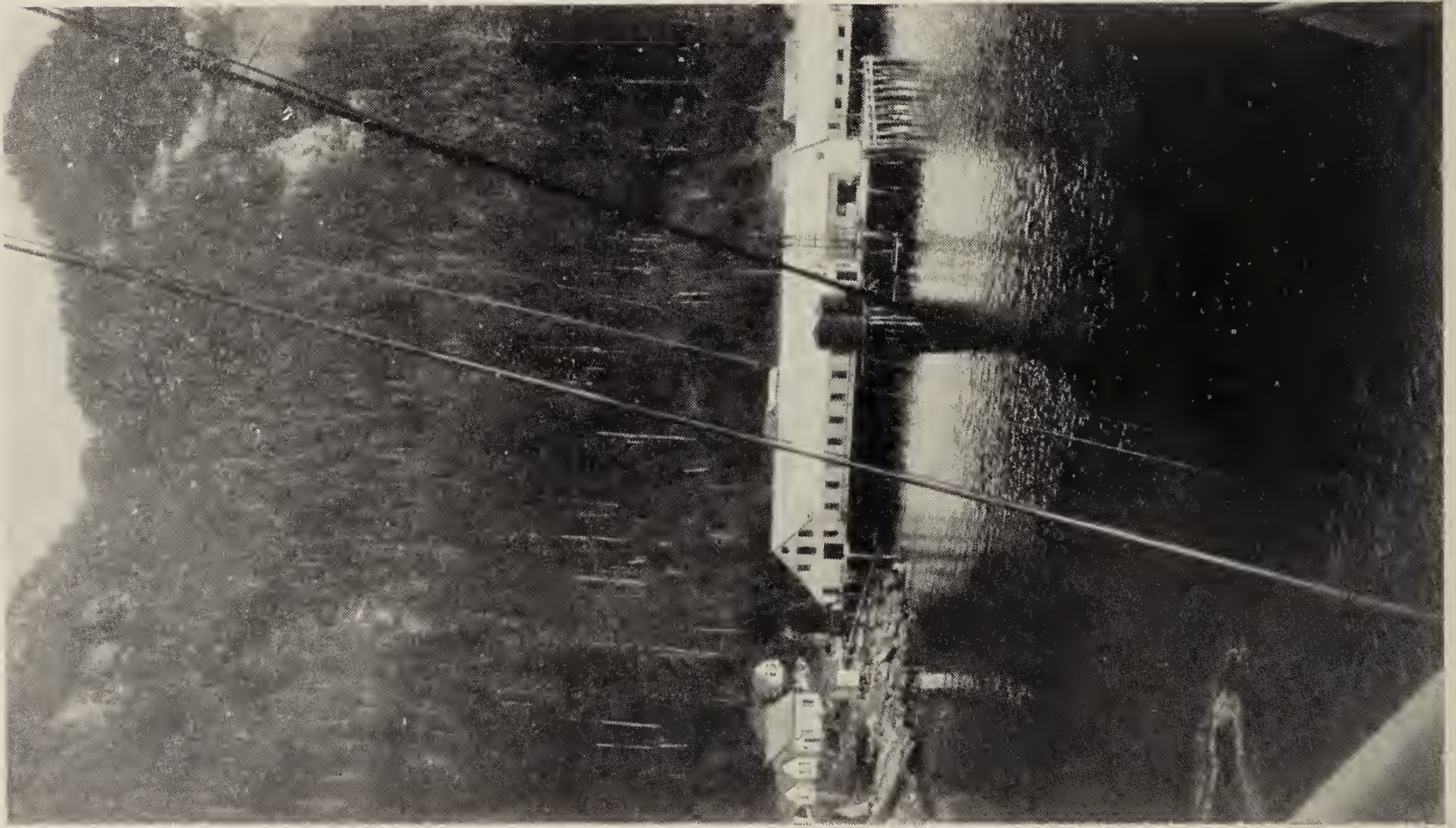
The salmon-fishing season just closing has been one of the best on record, quality and size being all that could be desired. The total pack amounts to 1,813,604 cases. Fishermen have



FISHERMEN WAITING THEIR TURN TO DELIVER NIGHT'S CATCH, STEVESTON, B.C., 1930.



"A FAIR DRIFT." SALMON JUST IN FROM SEA.



TYPICAL SALMON-CANNERY, B.C. COAST-LINE.

reaped a rich harvest owing to high fixed price per fish. Approximately 135 canneries and fish plants were operated this season. The regulations for the sanitary handling of fish have been strictly observed by the canners throughout the season. Salmon landed on the cannery wharf fresh and firm, and from then on to the time they are canned and cooked they are handled by gloved human hands only for washing and cleaning the entrails from the fish; the balance of the operation—cutting, filling, weighing, and cooking—is all performed by ingenious machinery. Employees are furnished with clean linen uniforms and gloves whilst handling the raw fish. The cannery floors, trays, and troughs are thoroughly washed daily during the canning season, and all knives and machinery are under constant watchful eyes of mechanical experts to guard against rust or fish cuttings, and thus the enviable reputation of British Columbia canned salmon is maintained. It might also be added that these plants are also subject to frequent visits by Provincial Board of Health Officers and also Federal Fishery Overseers.

OYSTER-CULTURE.

The cultivation of oysters at several points of our coast-line is now established and being carried out with gratifying and profitable rewards. The quality is such that the demand from outside points is beyond the supply. Every oyster-bed in British Columbia is located in waters absolutely free from contamination and operated under sanitary conditions prescribed by this Department and subject to frequent inspection.

During the past year we have been called upon to advise many of our progressive municipalities on matters of sewage-disposal, water-pollution, and nuisances.

The number of industrial camp inspections total 370; visits to canneries total 110; watershed visits total 9; and visits to various sections for the abatement of nuisances total 23.

The foregoing gives an outline of the work of this branch of your Department. The service has been carried out systematically and I have received cordial co-operation from employers and employees alike. I have not had to resort to the Courts, and it would ill become me to conclude without an expression of official gratitude to our Provincial Police for their generous and cheerful assistance throughout the length and breadth of British Columbia.

I have, etc.,

FRANK DEGREY,

Chief Sanitary Inspector.

COMBINED REPORT OF TRAVELLING MEDICAL HEALTH OFFICER
AND INSPECTOR OF HOSPITALS.

PROVINCIAL BOARD OF HEALTH,

VICTORIA, B.C., July 31st, 1930.

H. E. Young, M.D., C.M., LL.D.,

Provincial Health Officer, Victoria, B.C.

SIR,—I have the honour to submit herewith my Seventh Annual Report as Travelling Medical Health Officer and Inspector of Hospitals for the Province.

You will see from the statements given below that there has been a very great increase in the number of cases examined at our clinics this last year, in comparison with other years. In fact, the increase was so great that the clinical part of our work overshadowed the other divisions of our activities—namely, the Educational and the Hospital Inspection Services. This will be seen when these are dealt with later in this report. This condition of increasing numbers of examinations yearly is just a recurrence of what has taken place each year since the work was started in 1923. The increase is greater, however, in 1929–30.

This condition, I take it, is an evidence of the appreciation by the medical profession and by the public in general of this line of public-health service. It was only made possible by the hearty co-operation of the above named, along with the local Health Officers, Public Health Nurses, but especially by the valuable assistance of the Travelling Nurse and X-ray unit provided out of funds from the Christmas-seal sale.

It has been possible to cover the entire Province pretty thoroughly this last year and at the same time to carry out our programme of clinics at stated times. Thus, Victoria has had regular clinics of a week's duration—sometimes longer—every two months; Nanaimo, Ladysmith, and Duncan, about three times a year; and clinic at New Westminster, begun early in 1929, has been continued at three- or four-month intervals. This clinic appears to be a much appreciated service, not only by the doctors of New Westminster, but by those from the Lower Fraser Valley as well. This clinic will be continued.

It is now our fixed policy to hold all clinics at hospitals instead of partly at doctors' offices, as in the past. This was made necessary on account of our portable X-ray service, and I would here like to express my appreciation of the hearty co-operation of the hospital lady superintendents and staffs in our work, often at considerable inconvenience to them. It, however, has this advantage to the hospital, in that it makes it more or less a unit in public-health work—a position I am convinced all our hospitals should occupy.

The total number of examinations made during the year was 1,779. Of these, 1,222 were new cases and 557 were re-examinations.

The 557 cases returning for re-examination may be classified as follows: Pulmonary tuberculosis, 201; T.B. joints, 11; suspects, 95; 142 as various non-tuberculous findings (the most important of which are pleurisy, mixed infection, bronchitis, bronchial asthma, bronchiectasis, pneumonia, mediastinitis, empyema, silicosis, anthracosis, cervical adenitis, abscess lung, etc.); and 108 as negative.

The 1,222 new cases may be classified as follows: 220 as positively tuberculosis, of which 186 were pulmonary tuberculosis and 34 non-pulmonary tuberculosis; 137 as suspects; 316 as other chest conditions; 6 non-tuberculosis bone conditions; 49 other diagnosis; and 494 negative findings.

Of the above 1,222 cases, 233 were examined on account of contact only with open cases of tuberculosis. Of these 233 cases, 18 were classed as positively tuberculosis, of which 11 were pulmonary tuberculosis and 7 non-pulmonary tuberculosis; 34 as suspects; bronchitis, 4; pleurisy, 7; mediastinitis, 11; cervical adenitis, 4; mixed infection, 2; other diagnosis, 3; and negative findings, 150.

The pleurisies above mentioned were practically all of a chronic type, consequently presumably tubercular.

Classifying the new positive T.B. cases (pulmonary and hylus T.B. only) according to nationality, making 186 in all, gives us the following: Born in British Columbia, 54, of whom 15 were Indians; other Canadian Provinces, 30; British Isles, 48; other European countries, 21; United States of America, 9; Japan, 4; China, 3; Hindu, 1; and doubtful, 16.

Of the 186 positive cases of T.B. diagnosis, 23, or 12 per cent., had resided in British Columbia less than three years. The origin of these is as follows:—

Under 1 year—		
Other Canadian Provinces	5	
British	5	
Foreign	6	
		— 16
From 1 to 2 years—		
Other Canadian Provinces	2	
British	2	
Foreign	1	
		— 5
From 2 to 3 years—		
Other Canadian Provinces	—	
British	2	
Foreign	—	
		— 2
		—
Total		23

NURSING AND X-RAY SERVICE.

The total X-ray examinations were 1,179. This X-ray work has been done for the most part by our nurse, Miss J. B. Peters, whose services, as well as the X-ray equipment and upkeep, was made possible through the Christmas-seal sale. As stated last year, a portable X-ray has many advantages over using equipment available in each town, the most important of which is the uniformity of the films, hence greater ease and accuracy of interpretation.

Miss Peters has been of great assistance also in making and filing reports of cases examined. Aided by portable typewriter, all our reports to doctors are sent out in form of a letter instead of on cards as formerly. Records consequently are much more valuable than formerly.

	COMPARATIVE REPORT.	
	1928-29.	1929-30.
Total examinations	991	1,779
Re-examinations	290	557
New cases	701	1,222
Positive T.B. (new)	117	186
T.B. other organs	10	34
Suspects	95	137
Non-T.B.	479	865

The number of clinics held during the past year has been 83. The new cases of tuberculosis in Greater Victoria during 1929-30 was 42.

You will notice in the figures above that there is a large number classed as suspects. This is accounted for in many ways. We might say that in a goodly number we "suspect" they are not tubercular. Any case that it was felt should be followed up and returned for future examination was put in this category, to assure that they would not be overlooked. Again, most of the cases of pleurisy were so classed. Of these there were a particularly large number, more than the year previous, and in 1928-29 I made special mention of it. These, with the large number of cases classed as mixed infection, for want of a better name, cases which show peri-bronchial irritation on X-ray films and a history of a good deal of disability extending over long periods of time, seem to be an ever-increasing number. At times it is very difficult to distinguish these cases from tuberculous disease.

In view of the great increase in clinical work, thus lessening time available for other branches of the service of equal or greater importance, I would suggest that the question of increasing the personnel of this branch be very seriously considered. A suggestion that I have already made in a previous report seems to me feasible and would work to the benefit of the public, also the institution. I refer to the suggestion of having one of the medical staff at Tranquille Sanatorium take part of clinics in the Interior. I believe the Medical Superintendent, Dr. A. D. Lapp, is prepared to give the matter consideration at least. There will probably be sufficient funds available from the seal-sale to provide another nurse for such clinics. In fact, there is sufficient work now to employ another nurse, and this has been seriously considered by the Tranquille Publishing Society.

One sees the necessity for greater education of the public when one comes in contact with the irreparable damage that is being done by the indiscriminate use of heliotherapy or "sun cure." The sun is a very powerful curative agent, but for that very reason should only be taken in very well-regulated dosage. Every summer brings its quota of cases that had been making good progress towards recovery. A short holiday at the beach and they return home with a fairly quiescent lesion whipped into activity from which the patient may or may not recover.

While for the last two years we have had to report an increase in our mortality statistics from tuberculosis, a very marked increase in 1928, I ventured to suggest that this large rise was probably only temporary or accidental, as it had happened in most of the other Provinces of Canada a year or two previously. This is partly borne out by a moderate drop in the death-rate for 1929.

There is some evidence that the type of disease is changing. We appear to be getting more of the acute type of disease in the young adolescents. From information to hand, that does not seem to be confined to British Columbia, but reports from other parts of Canada and also of Europe are the same.

When the new 100-bed Greaves Building at Tranquille was in course of construction, we believed that on occupation it would relieve the congestion there for some years to come. This, however, has not proved to be the case to any great extent, as there is now almost continually a waiting-list, making it difficult to get cases admitted when diagnosed, and some, at least, of the early cases become moderately advanced ones before admission to the Sanatorium. This condition obtains not because of the increased number of tuberculosis cases, but the readiness with which people accept Sanatorium treatment. It is very seldom that we now have a case that refuses to go to Sanatorium when advised to do so, whereas a few years ago this was a very common condition. Thus it would seem that we already should be considering how best to extend our facilities for taking care of these unfortunate people. If the recommendations of the Hospital Commission with regard to Vancouver should be carried out, it will no doubt relieve the condition partially, but this is a development that is going to take some years to fulfil.

The following analysis of deaths from tuberculosis is of interest:—

CHINESE, BRITISH COLUMBIA.

Year.	Deaths from Tuberculosis.	Deaths, all Causes.	T.B. Rate per Cent., all Deaths.	Chinese Population.	T.B. Rate per 1,000 Population.
1921.....	49	220	22.26	23,533	2.08
1922.....	64	232	27.58	23,533	2.72
1923.....	44	228	19.29	23,533	1.87
1924.....	40	211	18.95	23,533	1.70
1925.....	44	195	22.56	23,533	1.87
1926.....	59	224	26.34	23,533	2.55
1927.....	50	211	23.69	23,533	2.12
1928.....	45	224	20.08	23,533	1.91
1929.....	43	258	16.66	20,000	2.15

BRITISH COLUMBIA INDIANS.

Year.	Deaths from Tuberculosis.	Deaths, all Causes.	T.B. Rate per Cent., all Deaths.	Indian Population.	T.B. Rate per 1,000 Population.
1921.....	104	364	28.57	25,694	4.05
1922.....	99	370	26.76	25,694	3.85
1923.....	133	432	30.79	25,694	5.18
1924.....	125	457	27.35	25,694	4.86
1925.....	155	436	35.55	24,316	6.37
1926.....	145	416	34.85	24,316	5.96
1927.....	151	524	28.81	24,316	6.20
1928.....	175	497	35.21	24,316	7.19
1929.....	170	540	31.48	25,107	6.77

JAPANESE, BRITISH COLUMBIA.

Year.	Deaths from Tuberculosis.	Deaths, all Causes.	T.B. Rate per Cent., all Deaths.	Japanese Population.	T.B. Rate per 1,000 Population.
1921.....	33	142	23.24	15,006	2.19
1922.....	22	190	11.58	15,806	1.38
1923.....	24	158	15.19	16,004	1.49
1924.....	23	150	15.33	17,418	1.32
1925.....	33	195	16.92	18,226	1.81
1926.....	28	161	17.39	19,048	1.47
1927.....	35	209	16.74	19,048	1.83
1928.....	27	170	15.88	19,048	1.41
1929.....	39	191	20.41	19,455	2.00

RACES OTHER THAN CHINESE, JAPANESE, AND BRITISH COLUMBIA INDIANS.

Year.	Deaths from Tuberculosis.	Deaths, all Causes.	T.B. Rate per Cent., all Deaths.	Population.	T.B. Rate per 1,000 Population.
1921.....	326	3,846	8.47	460,349	0.70
1922.....	322	4,115	7.82	474,917	0.67
1923.....	324	4,179	7.75	478,769	0.67
1924.....	339	4,186	8.09	486,355	0.69
1925.....	306	4,119	7.42	494,925	0.61
1926.....	300	4,673	6.42	501,103	0.59
1927.....	315	4,806	6.55	508,103	0.61
1928.....	386	5,019	7.69	516,103	0.74
1929.....	363	5,408	6.71	526,438	0.68

BRITISH COLUMBIA, ALL RACES INCLUDED.

Year.	Deaths from Tuberculosis.	Deaths, all Causes.	T.B. Rate per Cent., all Deaths.	Population.	T.B. Rate per 1,000 Population.
1921.....	512	4,572	11.19	524,582	0.97
1922.....	507	4,907	10.33	539,000	0.94
1923.....	525	4,997	10.50	544,000	0.96
1924.....	527	5,004	10.53	553,000	0.95
1925.....	538	4,945	10.87	561,000	0.95
1926.....	532	5,474	9.72	568,000	0.93
1927.....	551	5,750	9.58	575,000	0.95
1928.....	633	5,910	10.79	583,000	1.08
1929.....	615	6,397	9.61	591,000	1.04

THE EDUCATIONAL PART OF THE WORK.

As stated earlier in this report, due to the great increase in the clinical service, educational propaganda was of necessity neglected.

Addresses were given to one class of high-school pupils; one District Convention of Women's Institutes at Chilliwack; one Gyro Club; one Rotary Club; one Public Health Nursing class at the University of British Columbia; six classes of nurses-in-training. I also attended the annual meeting of the Tranquille Publishing Society.

HOSPITAL INSPECTION.

As Hospital Inspector, fifty-five private hospitals were inspected; in one case four inspections were made; in another, three; and still another, two. Also forty-one public hospitals and two isolation units.

Twelve meetings with Hospital Boards were held; twenty-three with committees of Boards; and seventeen interviews with Superintendent and Secretary.

Private hospital licences issued during year, 51, of which 7 were new licences. Private hospitals licences refused, 3.

During the past year I have attended meetings of the British Columbia Hospital Association; the opening of the new wing of the Lourdes Hospital, Campbell River; interviewed Provincial Fire Marshal, Mr. Thomas; three visits to Tranquille Sanatorium; one staff luncheon, St. Joseph's Hospital; four interviews, Mr. Winn and others of the Workmen's Compensation Board; attended annual meeting of the British Columbia Medical Association, as well as Summer School under the auspices of the same society; attended several meetings of the Victoria Medical Society; three meetings of the Vancouver Medical Society, at which new by-laws and new policy of the Vancouver General Hospital were discussed; also attended meeting of the Vancouver General Hospital Board, at which the representatives of the Vancouver Medical Society presented their views to the Board *re* the change in policy from an open to partially closed hospital; also attended inaugural meeting of the Hospital Commission on November 4th at City Hall, Vancouver.

New hospitals or extensions have been made during the year as follows: New Nurses' Homes at both the Royal Jubilee and St. Joseph's Hospitals in Victoria; the Tuberculosis Pavilion at the Jubilee Hospital is being remodelled and added to; new Nurses' Home is in course of construction at St. Paul's Hospital, Vancouver; also a new one at the Royal Columbian Hospital, New Westminster, recently occupied; new wing has been added to Lourdes Hospital, Campbell River, which brings that institution up-to-date and more than doubles the bed capacity; new wing has been added at Penticton Hospital; and a new unit is in course of construction at Trail, which when completed will about double their bed capacity and give some modern facilities for isolation cases; a new hospital, very much needed, is in course of construction at Hazelton; a small cottage hospital has recently been opened at Creston. Burns Lake, I understand, has not yet got beyond the negotiation stage. Smithers still needs a hospital badly and it is to be hoped that some arrangement of financing can be made shortly.

No questions of sufficient importance for a formal meeting of the Board of Arbitration were submitted, but some informal discussions took place between the Inspector of Municipalities and myself.

Once again I would like to express to you my keen appreciation of your cordial co-operation and helpful assistance at all times in this particular line of health-work; also for much timely advice in connection with hospital-work. I would also like to express my sincere thanks to the doctors and nurses, and especially to nursing and clinical staffs of the many hospitals in which clinics were held, for their ever-ready and willing co-operation.

I have, etc.,

A. S. LAMB, M.D.,
Travelling Medical Health Officer and Hospital Inspector.

REPORT OF EPIDEMIOLOGIST.

PROVINCIAL BOARD OF HEALTH,
VICTORIA, B.C., September 19th, 1930.

H. E. Young, M.D., C.M., LL.D.,
Provincial Health Officer, Victoria, B.C.

SIR,—I have the honour to submit herewith a report of the epidemiological work for the year 1929-30.

As there are many factors to be considered in the epidemiology of infectious diseases in addition to the time, location, and number of cases, it was decided that every effort should be spent in the beginning of our activities to establish a system of receiving reports of infectious diseases which would quicken the Department's knowledge of their presence and at the same time provide direct and periodic communication with the individual physicians of the Province, or where there is a full-time urban or municipal health officer, indirectly through his department with the physicians who are practising in his district.

Accordingly, just as soon as the necessary arrangements could be made, a card system of reporting was established toward the end of November. These cards were franked and stamped with our return address and sent to the physicians of the Province every week, who in turn entered the infectious diseases experienced in their clientele for the past week and returned to the Department. These cards called for the number of individual cases, age, race, sex, and location. Of the total number of cards sent out during the year, about 90 per cent. have been returned, which illustrates that our information of infectious diseases is obtained from a source which represents approximately 90 per cent. of the total population. It also shows that the physicians have taken an active interest in supplying the Department with specific data.

By the use of graphs and further analysis of these statistics the rise and fall of the infectious-disease incidence, collectively and individually, has been recorded for every month of the year. The seasonal variations are also shown, and through the co-operation of the Department of Vital Statistics the fatalities from the diseases reported have been recorded. All of which has provided the Department with a general view of health conditions and a numerical evaluation of the communicable-disease incidence. It will also provide the Board of Health with a greater wealth of material and data, which will be of benefit in the control of these diseases in the future.

STANDARDIZED LIST OF NOTIFIABLE DISEASES.

In compiling this list the Dominion Council of Health has included all the infectious diseases that may occur in Canada. The Provincial Board of Health has adopted this list as the notification standard for the Province, and it is from reports on the individual diseases comprising this list that we have compiled our morbidity statistics. The diseases included in the list are as follows:—

Anthrax.	Pellagra.
Actinomycosis.	Plague.
Botulism.	Pneumonia—
Cerebrospinal meningitis.	(a.) Acute lobar.
Chicken-pox.	(b.) Bronchial or lobular.
Cholera, Asiatic.	Poliomyelitis.
Conjunctivitis (acute infectious, including ophthalmia neonatorum).	Puerperal septicæmia.
Diphtheria.	Rabies.
Dysentery, amœbic and bacillary.	Scarlet fever.
Encephalitis.	Septic sore throat.
Erysipelas.	Smallpox.
German measles.	Tetanus.
Influenza, epidemic.	Trachoma.
Glanders.	Trichinosis.
Leprosy.	Tuberculosis.
Malaria.	Typhoid fever.
Malignant œdema.	Typhus fever.
Measles.	Undulant fever.
Mumps.	Whooping-cough.
Paratyphoid fever.	Yellow fever.

It is the intention of the Dominion Council of Health to standardize the reporting of these conditions throughout Canada. On receipt of information by weekly and monthly reports from the various Provincial Boards of Health regarding the prevalence of infectious diseases, the Dominion Council of Health forwards its analysis to the Public Health Bureau of the League of Nations. This system has been established in practically every country in the world, so that in the end returns can be made up of the universal prevalence of infectious diseases and the individual countries notified every week. Once a month this weekly report is followed by an acute analysis of the epidemiological prevalence of the major infectious diseases. In adopting this list of reportable diseases we are not only establishing a standard type of information for the Province and Canada, but we are becoming indirectly associated with the department of the League of Nations which has as its objective the consideration of infectious diseases from a universal standpoint.

For the year 1929-30 the infectious diseases reported to this Department are as follows:—

Diseases.	Cases.	Deaths.
Cerebrospinal meningitis	21	10
Chicken-pox	2,214	0
Conjunctivitis	351	0
Diphtheria	667	24
Dysentery	52	2
Dysentery (amœbic)	1	0
Dysentery (bacillary)	4	0
Encephalitis	2	4
Erysipelas	140	7
German measles	181	0
Influenza	1,224	88
Malaria	2	0
Measles	2,142	51
Mumps	1,688	0
Paratyphoid fever	11	1
Poliomyelitis	42	6
Scarlet fever	616	8
Septic throat (including tonsillitis and quinsy)	191	11
Smallpox	157	0
Tetanus	1	1
Trachoma	10	0
Tuberculosis	384	584
Typhoid fever	70	10
Undulant fever	3	0
Whooping-cough	1,701	14
Totals	11,875	821

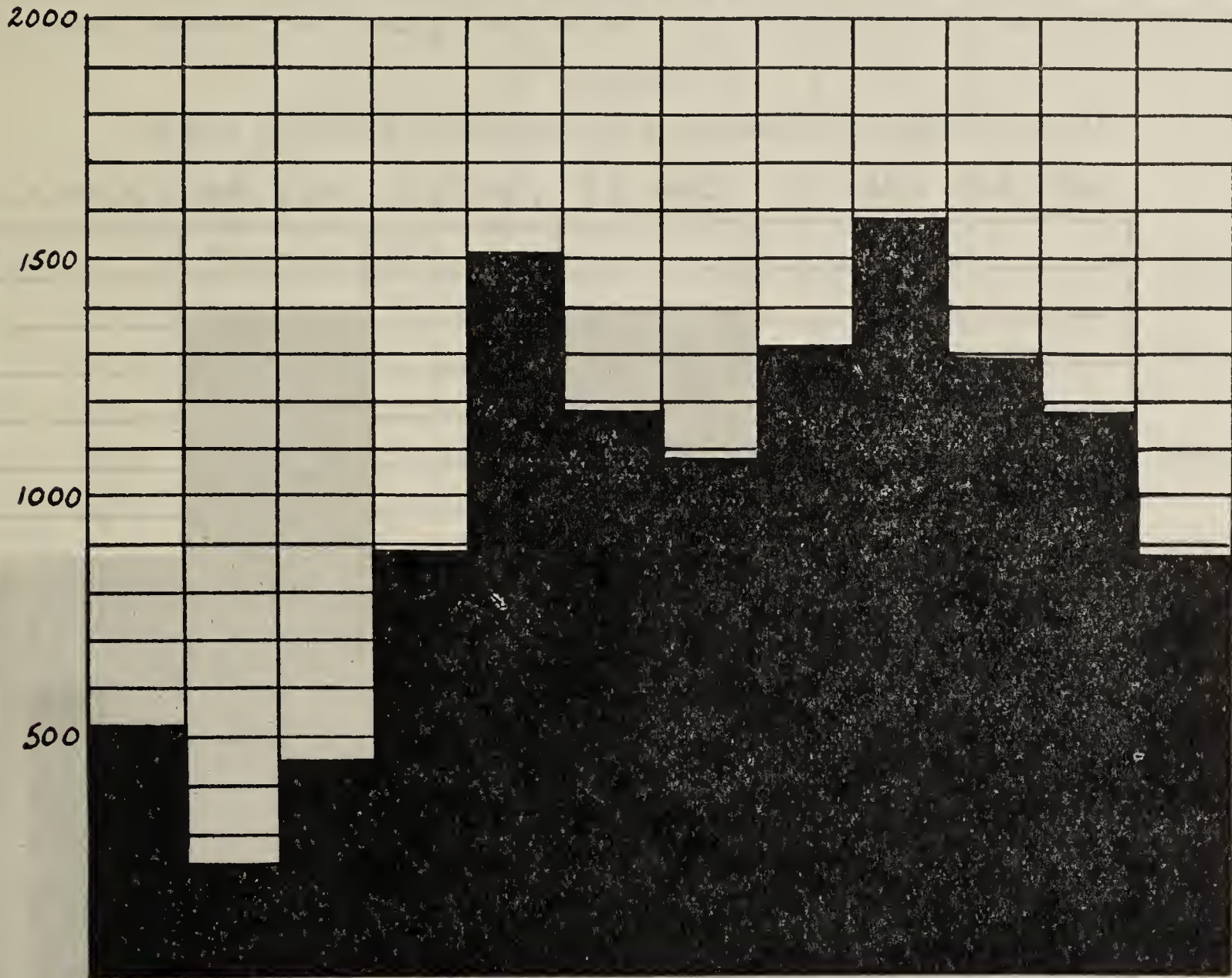
Owing to the irregular manner in which pneumonia has been reported and also due to the fact that our larger centres of population have not provided us with information regarding its prevalence, it was felt that no good purpose would be served by quoting figures which represent an indifferent picture of the prevalence of this condition. Accordingly, in our infectious-disease total pneumonia is not included. Pneumonia deaths for the year, however, were 226.

The above list of reported diseases and deaths are shown in Graph A.

GRAPH A.

MONTHLY INCIDENT OF INFECTIOUS DISEASES REPORTED FOR YEAR 1929-30.

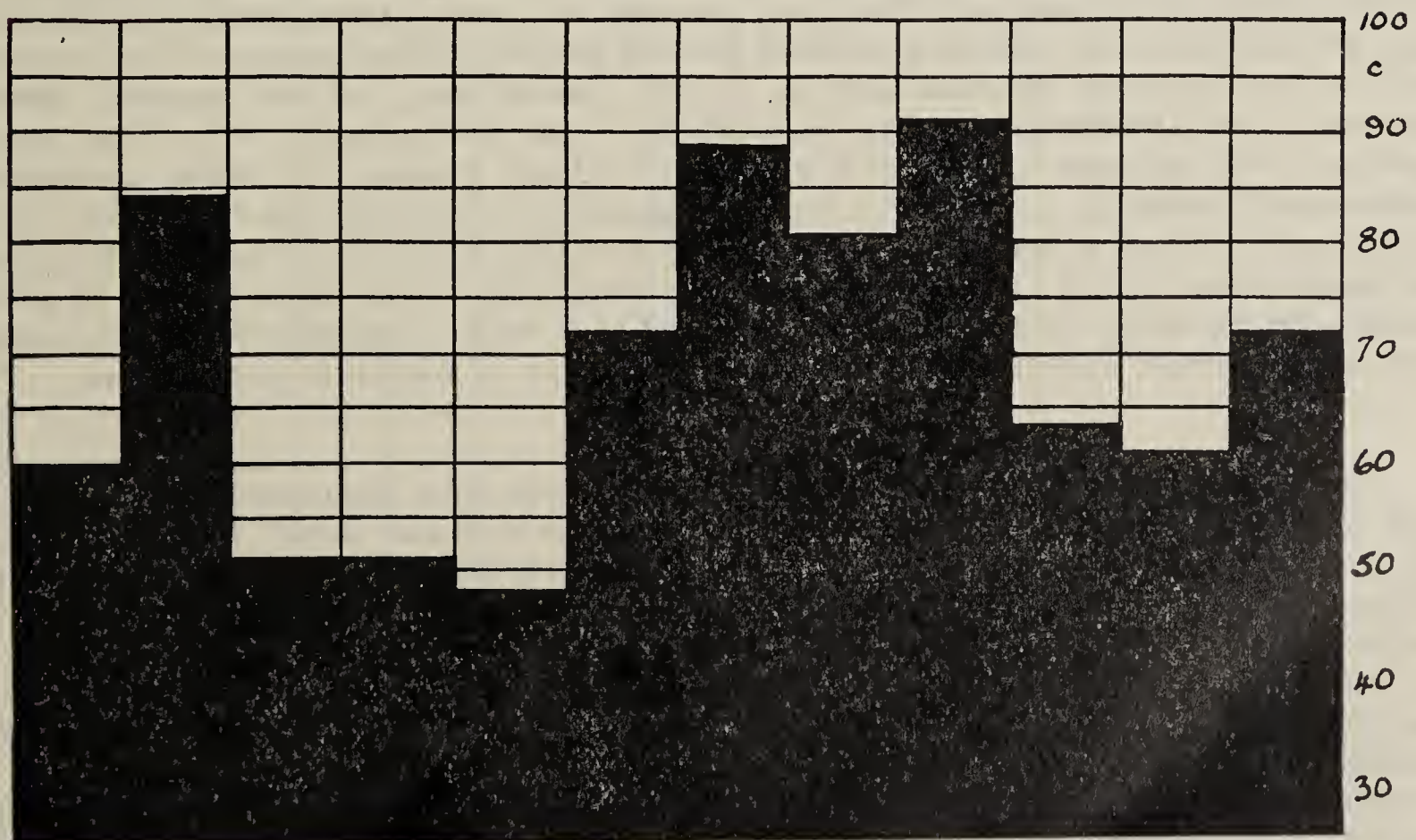
JULY. AUG. SEPT. OCT. NOV. DEC. JAN. FEB. MAR. APR. MAY JUNE



Total diseases (less pneumonia), 11,875; morbidity-rate per thousand, 20.

MONTHLY DEATHS FROM DISEASES REPORTED ABOVE.

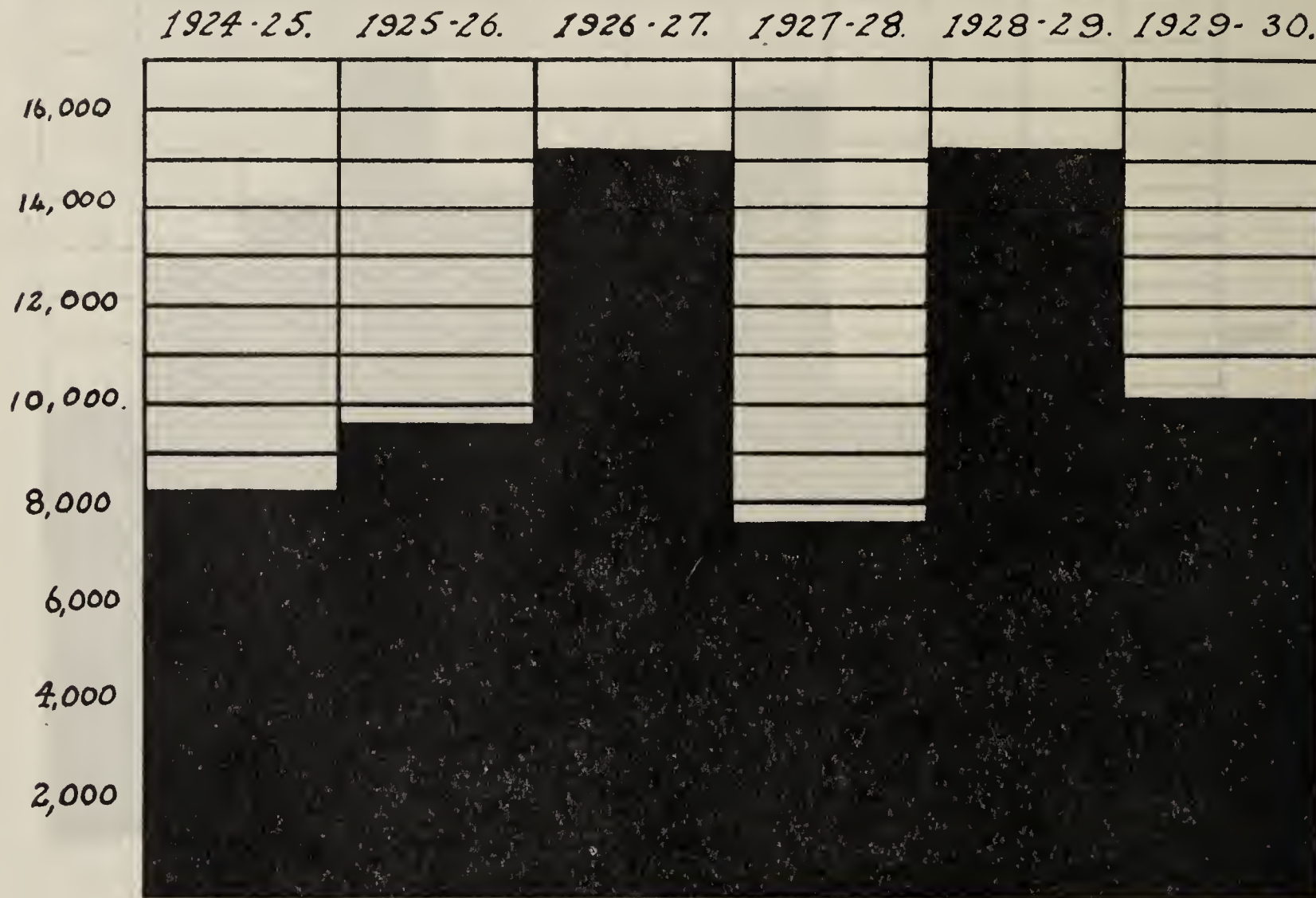
JULY AUG. SEPT. OCT NOV. DEC. JAN. FEB. MAR. APR. MAY. JUNE.



Total deaths (less pneumonia), 821; case fatality, 6.9 per cent.; crude death-rate per thousand, 1.4.

As illustrated in Graph B, the year 1929-30 does not present an extraordinarily large number of infectious diseases. The high peak in 1926-27 is due to an epidemic of measles and mumps. The high peak of 1928-29 was due to a large number of measles reported. The new system of reporting is not long enough established to provide satisfactory statistics for detailed comparison.

GRAPH B.
INFECTIOUS DISEASES REPORTED FOR SIX-YEAR PERIOD, 1924-25 TO 1929-30.



Although all of the diseases embodied in the notifiable-disease list must always be considered in public-health administration, there are some that rarely, if ever, occur in the Province. They must, however, be constantly watched for and guarded against because of our economic relations with countries in which they are more or less endemic. Of the remaining diseases reported to the Department, it may be said that, with the exception of malaria, amœbic dysentery, and psittacosis, their occurrence is relatively common. Of these, tuberculosis, cerebrospinal meningitis, poliomyelitis, typhoid, diphtheria, and scarlet fever occasion a major public-health problem, either because of their high mortality or because of the potential danger and complications that are associated with them. But because of the great number of persons affected and the danger which is always associated with them in epidemic formation, measles, chicken-pox, mumps, whooping-cough, and smallpox occupy an important position also.

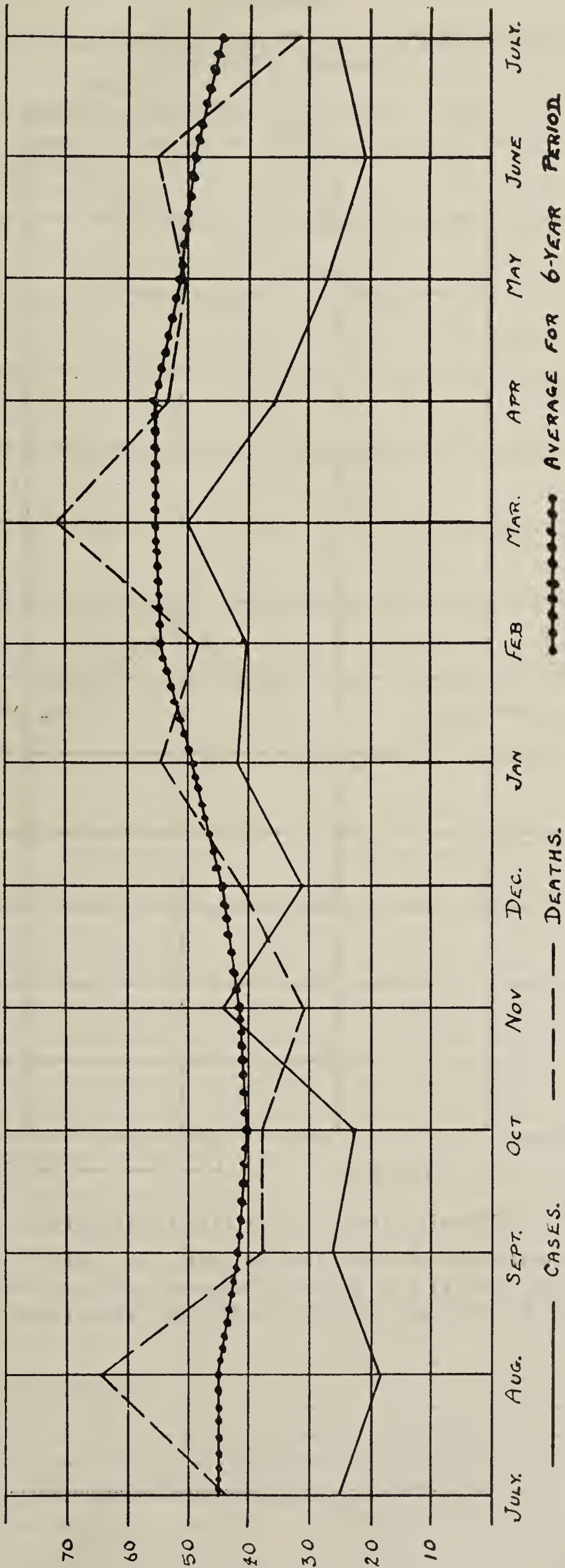
TUBERCULOSIS.

Graph C shows the monthly number of cases and deaths from tuberculosis reported for the year 1929-30, together with the average monthly deaths for a six-year period, 1924-25 to 1929-30. This graph shows that the greatest number of cases and deaths are reported for the months of February, March, April, and May. The average deaths for the six-year period closely follow the monthly mortality trend for the year 1929-30.

Graph D is a comparison of the deaths and cases for a six-year period. It will be seen that the trend of reported cases is decidedly upward. This upward trend is not due so much to an increase in the disease as it is due to a great improvement in the reporting of tuberculosis by the physicians of British Columbia. The year 1929-30 shows the largest number of cases reported, but it will also be seen that for this period the deaths show a decided decrease.

GRAPH C.

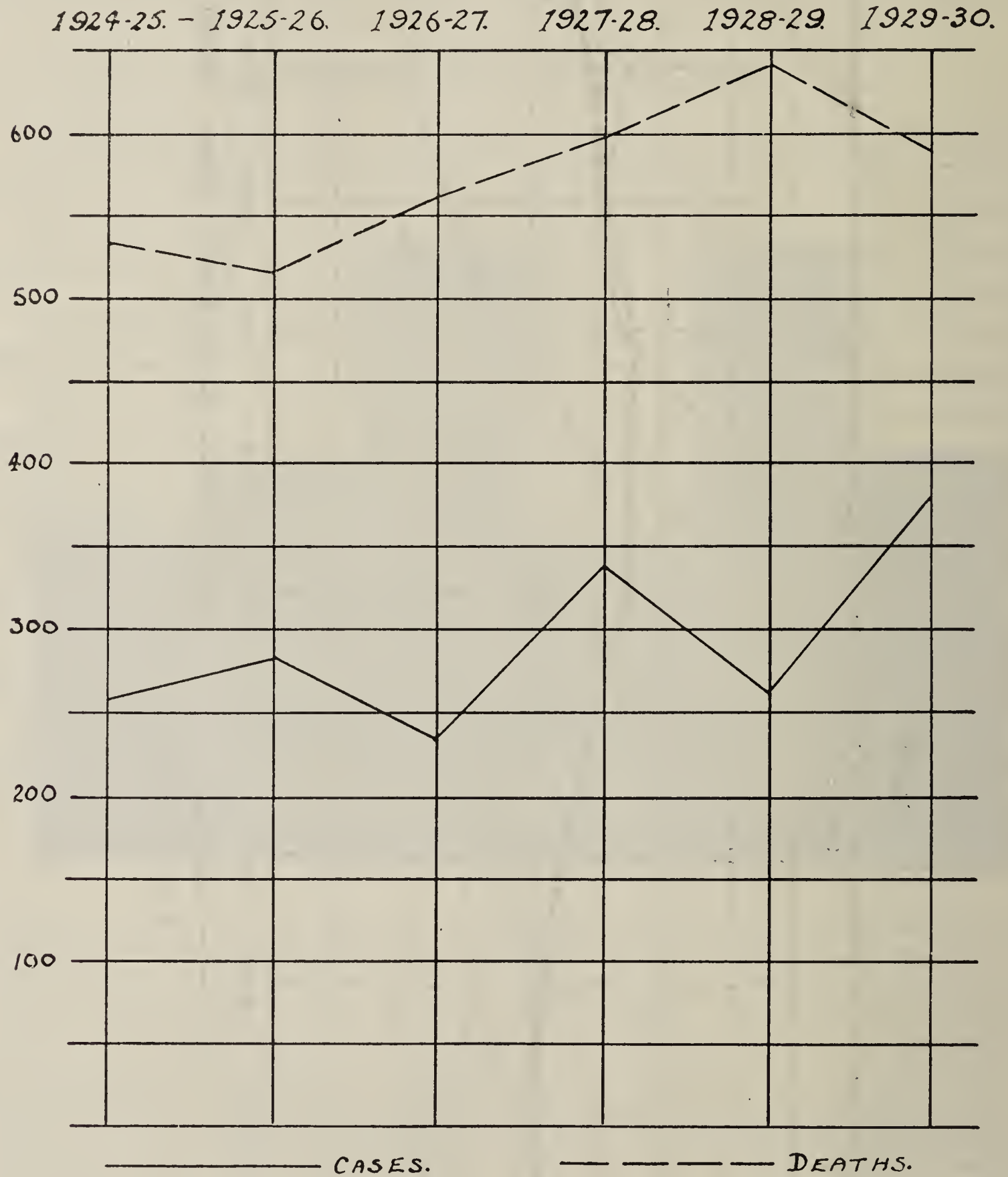
TUBERCULOSIS CASES WITH DEATHS REPORTED BY MONTHS FOR YEAR 1929-30, WITH AVERAGE MONTHLY DEATHS FOR SIX-YEAR PERIOD, 1924-25 TO 1929-30.



Total deaths, 584; total cases, 384.

GRAPH D.

YEARLY TUBERCULOSIS CASES AND DEATHS REPORTED FOR SIX-YEAR PERIOD,
1924-25 TO 1929-30.



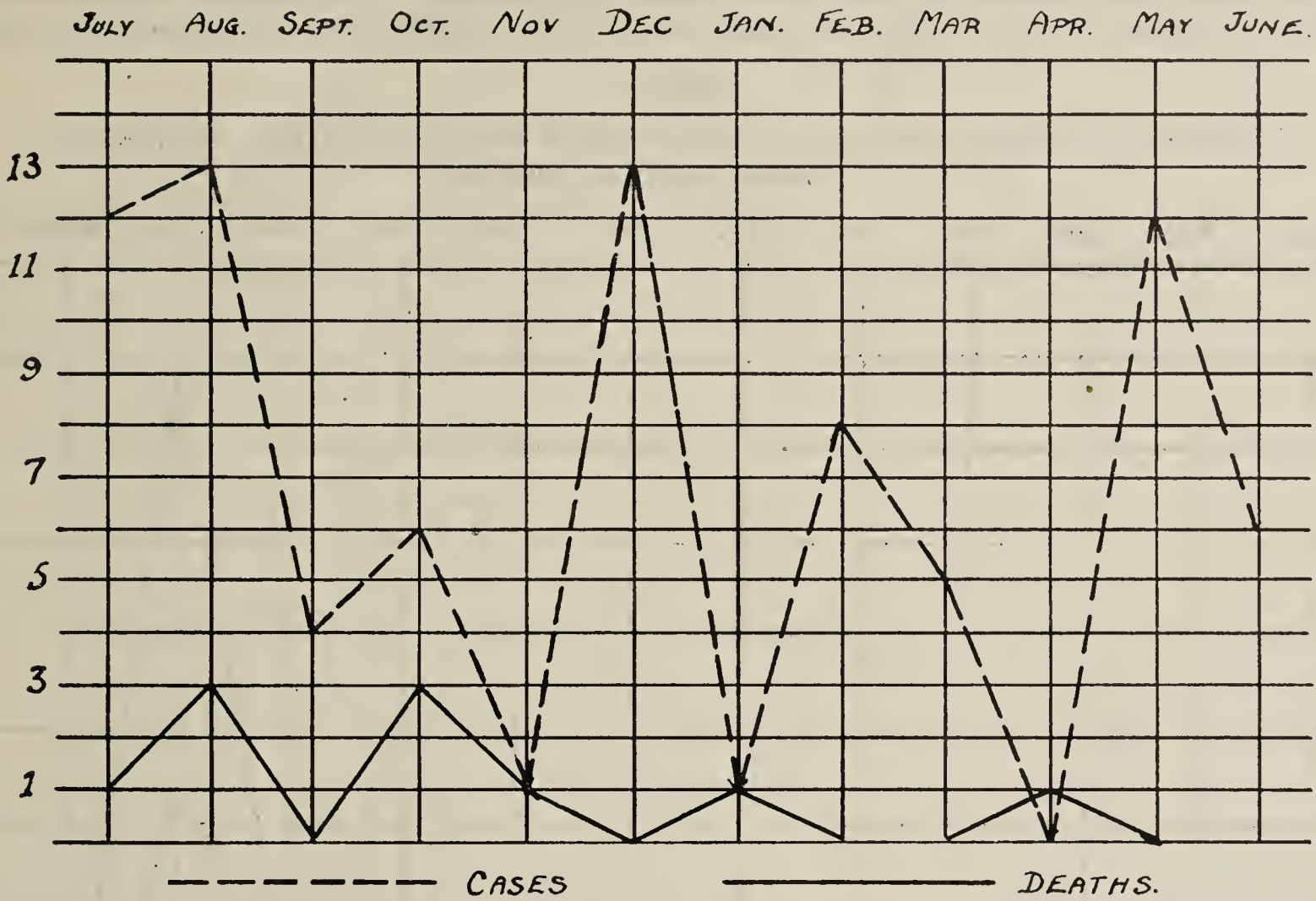
TYPHOID FEVER AND POLIOMYELITIS.

There is nothing extraordinary about Poliomyelitis and Typhoid Graphs E and F. We have been extremely fortunate in only having to contend with forty-two cases of poliomyelitis and 70 cases of typhoid for the year. For the previous five years cases of typhoid reported are as follows:—

1924-25	.....	109
1925-26	.....	109
1926-27	.....	64
1927-28	.....	67
1928-29	.....	89

GRAPH E.

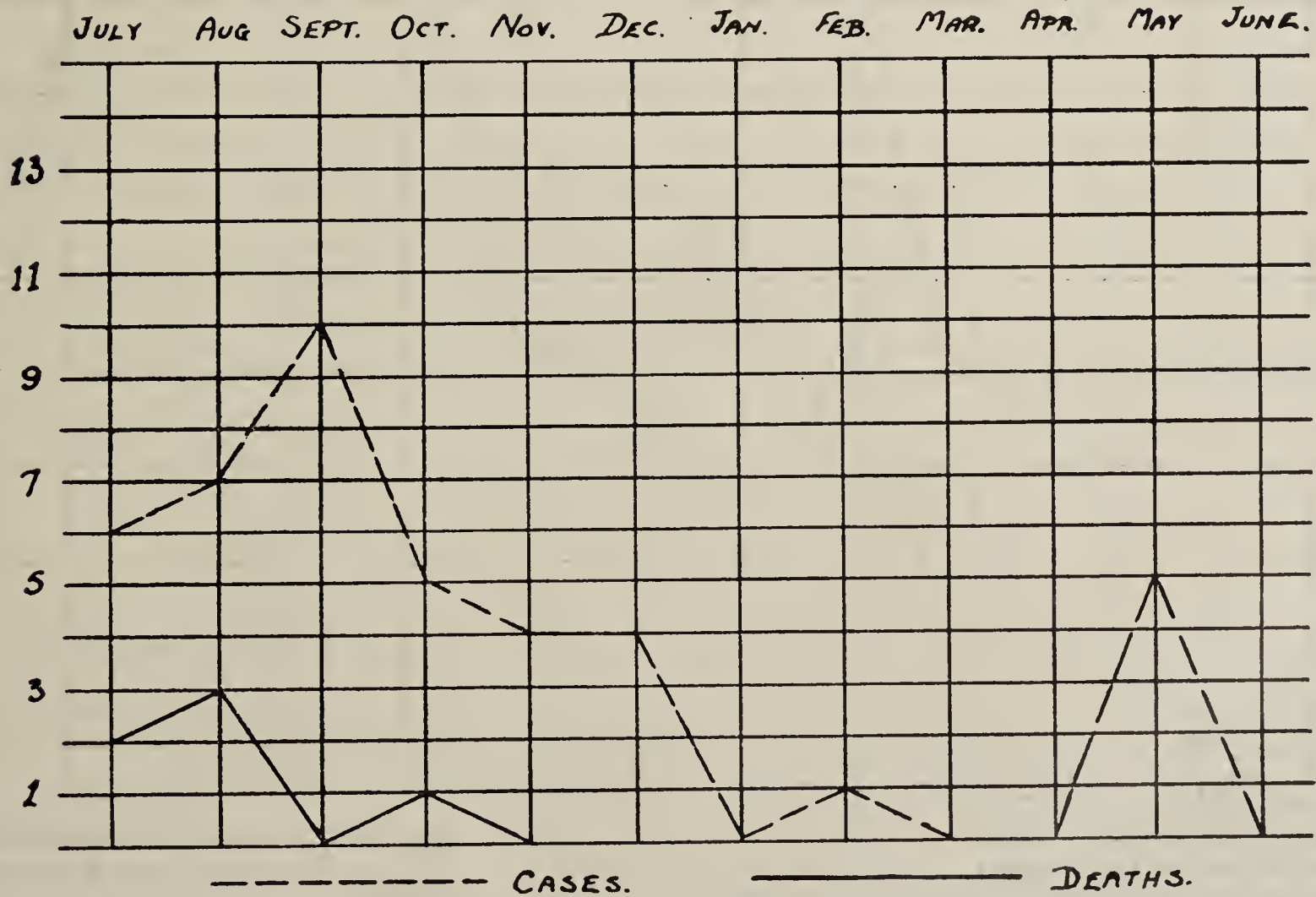
POLIOMYELITIS CASES AND DEATHS FOR 1929-30.



Total cases, 42; total deaths, 6; case fatality, 14.5 per cent.

GRAPH F.

TYPHOID CASES AND DEATHS FOR 1929-30.

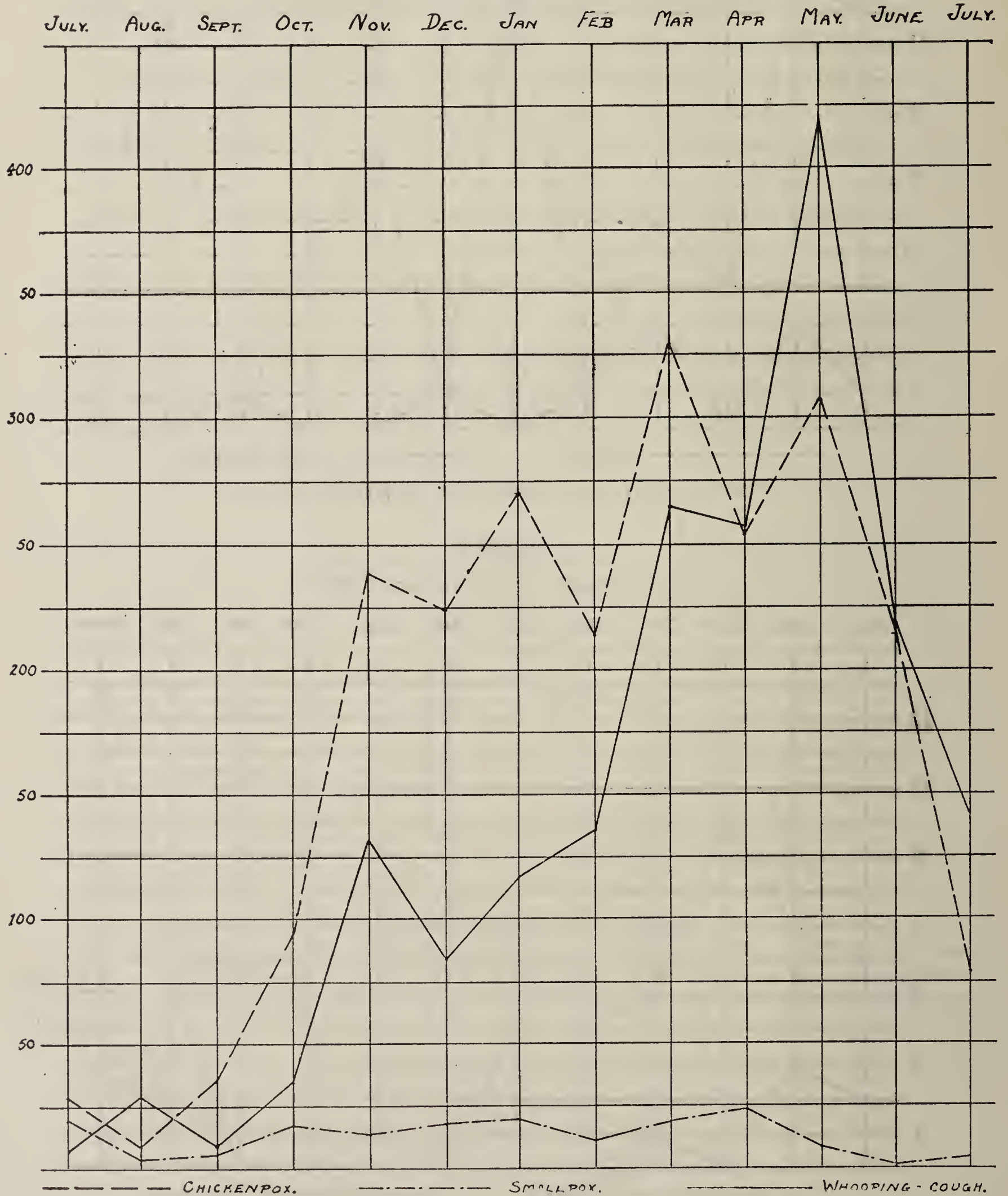


Total cases, 70; total deaths, 10; case fatality, 14.2 per cent.

Graphs G and H illustrate the monthly occurrence of the more common infectious diseases that are generally found amongst pre-school and school children. It is interesting to note that by far the greatest number of cases occur during the school term, and during the summer holidays these diseases reach a very low level; and, further, Graph H shows the peak of infection

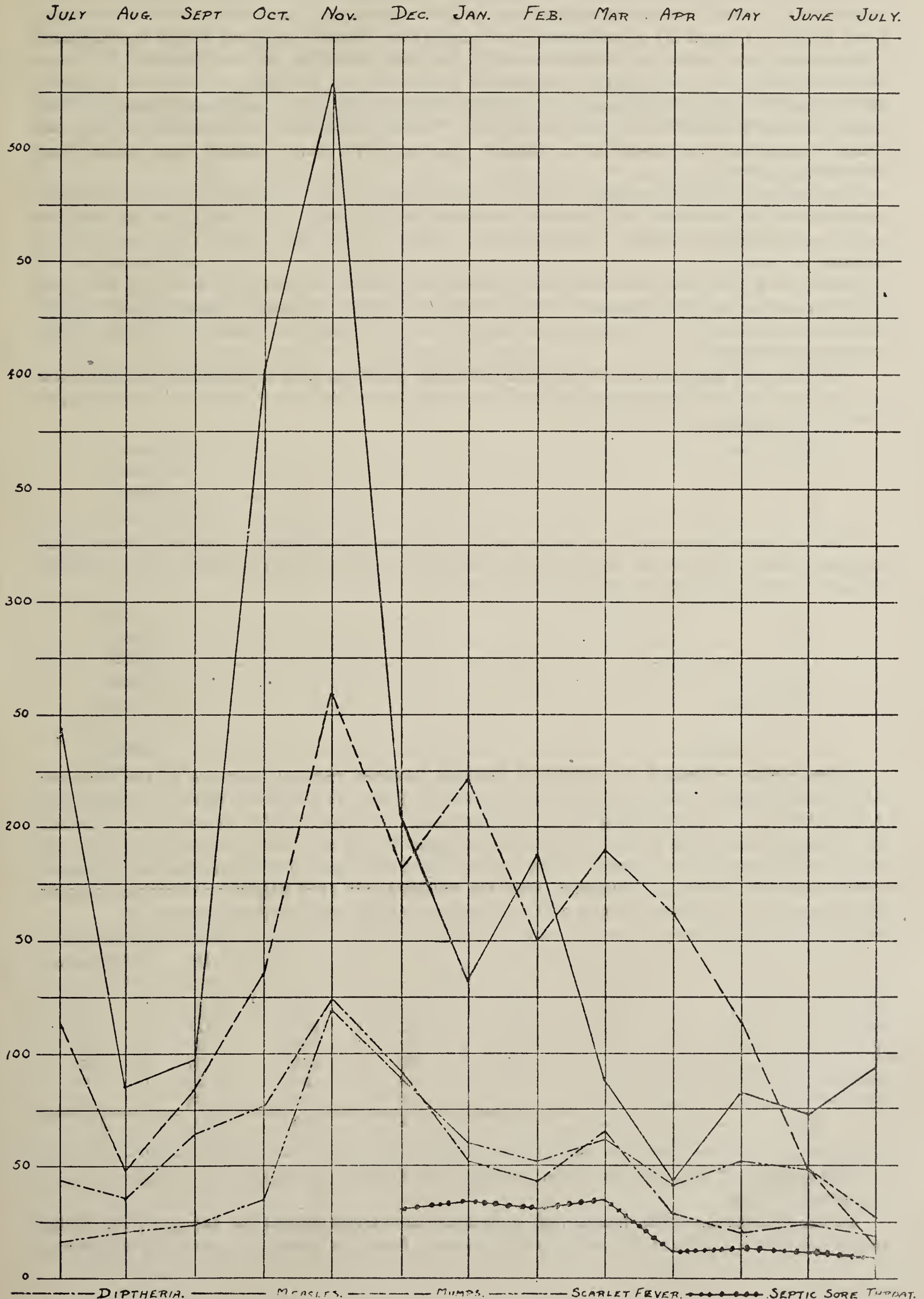
GRAPH G.

NUMBER OF CASES OF WHOOPING-COUGH, CHICKEN-POX, AND SMALLPOX REPORTED BY MONTHS FOR YEAR 1929-30.



Whooping-cough: Total cases, 1,701; deaths, 14. Chicken-pox: Total cases, 2,214; deaths, *nil*.
 Smallpox: Total cases, 157; deaths, *nil*.

GRAPH H.—CASES OF MEASLES, SCARLET, DIPHTHERIA, MUMPS, AND SEPTIC THROAT REPORTED BY MONTHS FOR YEAR 1929-30.



Measles : Total cases, 2,142 ; deaths, 51. Scarlet : Total cases, 616 ; deaths, 8. Diphtheria : Total cases, 667 ; deaths, 24. *Septic throat : Total cases, 191 ; deaths, 11. (*Includes tonsillitis and quinsy.)

for measles, scarlet, diphtheria, and mumps as occurring during the month of November, approximately three months after the beginning of the school term. It will also be seen that the monthly trend of scarlet, diphtheria, and septic sore throat follow each other very closely. These diseases (Graph H) alone account for ninety-four deaths. Measles, which is considered by the parent as harmless and a trifling matter, was responsible for fifty-one deaths. If it were possible to instil in the lay mind the impression that measles is a dangerous condition, a greater effort would be taken by the parents to avoid infection and they would more closely confine such of their children who are affected with it. Of the three, scarlet and diphtheria have the highest mortality, but, nevertheless, measles accounted for more deaths than scarlet and diphtheria combined.

In Graph G whooping-cough and chicken-pox show a peak occurring much later in the school term than in Graph H. The reason for this is not clear, and it will only be after an analysis of monthly morbidity statistics over a long period of time that an opinion could be formed.

Aside from the fatalities associated with the diseases of Graphs G and H, the loss from school attendance alone represents an economic factor worthy of serious consideration. Couple this with the economic loss, the grief and worry of the individual householder, and it represents a still greater deficit.

Following the introduction of the card system of reporting late in November, a record was kept for the last half of the year of the race and age of the cases reported. The age was classified into groups as follows:—

A	0-1 year.
B	2-5 years.
C	6-16 years.
D	17 and over.

This represents the infant, pre-school child, school-child, and adult. For this period of the year there were 5,133 whites, 44 Orientals, 5 negroes, and 490 Indians affected with infectious diseases. The age-groups reported are as follows:—

A	176
B	1,094
C	2,576
D	1,069
Unclassified	757

Total 5,672

These figures represent the infectious diseases reported from all portions of the Province, with the exception of Vancouver, from where, unfortunately, we have been unable to obtain data of the individual cases respecting race and age-groups. This total (5,672) represents the return for the six-month period of all the infectious diseases which are listed and considered for the year. An analysis of the above returns shows that by far the greatest number of infectious diseases occur in Group C. However, when we consider only such diseases as measles, mumps, chicken-pox, whooping-cough, diphtheria, and scarlet, we get the following returns:—

	A.	B.	C.	D.	Unclassified.
Measles.....	31	154	270	73	23
Mumps.....	12	112	366	119	39
Chicken-pox.....	36	276	755	57	68
Whooping-cough.....	68	399	425	21	117
Diphtheria.....	1	10	56	13	0
Scarlet fever.....	7	46	97	38	4
Totals.....	155	897	1,969	321	251

The analysis of race and age-group statistics will be more valuable when considered over a long period of time.

In the interest of public health and communicable-disease control for the year, the undersigned travelled a total of 9,895 miles and was absent from the office for a period of eighty-nine

days. These activities included investigations of outbreaks of infectious disease, talks, and radio broadcasts.

During the first week in May an investigation of an outbreak of psittacosis was concluded. A full report of this investigation has already been forwarded.

From the returns of the Medical Inspectors of Schools published in the annual reports for the years 1927-28 and 1928-29, the prevalence of goitre amongst the school-children of the Province was calculated. Of the 99,006 pupils examined in 1928, 6,526 were reported as suffering from goitre. This gives a morbidity rate per hundred of 6.6. Of the 96,036 pupils examined in 1929, 6,473 were reported as having goitre, which gives a morbidity rate per hundred of 6.7. These two figures show that there has been little change in the goitre incidence for the two years considered. In addition to this, an attempt was made to locate the areas in the Province in which the prevalence of goitre was most marked. Accordingly, the per cent. of goitre in each school was calculated and they were located on the map by pins of various colours, each colour representing a group of per cent. from 0-1, 1-5, 5-10, and so on up to 100. In this way the percentage of occurrence of goitre was grouped about the Province. The pins occurring within the borders of the various mining divisions were grouped and the percentage of goitre was then calculated for that division. The highest percentage of goitre was found in the mining divisions of Grand Forks-Greenwood, Ainsworth, Osoyoos, Alberni, and Slocan. This scheme is to be followed for the succeeding years in order to establish the goitre trend.

I have, etc.,

A. R. CHISHOLM, M.D.,

Epidemiologist.

TABLE SHOWING RETURN OF CASES OF CONTAGIOUS DISEASES IN THE PROVINCE, JULY, 1929, TO JUNE, 1930.

	Cerebrospinal Meningitis.	Chicken-pox.	Conjunctivitis.	Diphtheria.	Dysentery.	Dysentery (Amoebic).	Dysentery (Bacillary).	Encephalitis.	Erysipelas.	German Measles.	Influenza.	Malaria.	Measles.	Mumps.	Paratyphoid Fever.	Polymyelitis.	Scarlet Fever.	Septic Sore Throat.	Smallpox.	Tetanus.	Trachoma.	Tuberculosis.	T.B. Meningitis.	Typhoid Fever.	Undulant Fever.	Whooping-cough.	Total.	
Abbotsford and District		27		7					1								3		6							34	79	
Agassiz and District		3								4							3									5	15	
Albert and District		30							1									3								21	60	
Alert Bay and District		30						1		50																8	95	
Alexis Creek and District									1		1																8	
Anyox and District									1		57							16									74	
Armstrong and District	2	63	1				2		4	2	15			5	1		1	16	1			8			1	125		
Ashcroft and District										24	3			4			3					2					36	
Atlin and District											69			7													69	
Baynes Lake and District		11									18			23								3					19	
Bella Bella and District		6	4								29							1				1					45	
Bella Coola and District											1																41	
Bowser and District											1																8	
Bridge River and District											2																3	
Britannia Beach and District													1														3	
Burnaby and District	1	119	2	11					2				7	48		1	35		27			8		1		23	33	
Burns Lake and District	1	3											19													308	580	
Burns Lake and District		2								1				15	5		1	1		3		1					7	
Campbell River and District		2		1					1		10																36	
Chase and District		2									1			2													9	
Chemainus and District									2		26			17	2							2					55	
Chilliwack and District		62	1	1					1		72			39	8		1	10				7		1		74	279	
Clayburn and District		3	2																								10	
Cloverdale and District		27								8				30													68	
Coal Creek and District		3												23													35	
Coalton and District									2		30						40										77	
Cobble Hill and District														13			6										22	
Coquitlam and District		4		3						1			3											1		4	13	
Corbin and District		8								2			1	2													13	
Courtenay and District		11	1							7	24			77					5			2				43	172	
Crabrook and District		14	2	1					1					8		1		28				1				1	63	
Creston and District				3										50			3			1							59	
Cumberland and District		2							1		4						1									6	20	
Denman Island and District											13																22	
Duncan and District		40								1			274	53			17									9	391	
Edgewood and District				1									4	6													11	
Enderby and District													31			2	1										34	
Esquimalt and District		41											53													2	99	
Ferrie and District		15		10					1	137			4	101		8	6					3			19	301		
Field and District		13								2			2			1	3										23	
Fraser Lake and District											15			25													42	
Fraser Lake and District													8														15	
Gibsons Landing and District														50			1	2									5	
Giscombe and District			19																								92	
Golden and District											5					4											10	
Grand Forks and District		3									19																53	
Greenwood and District																											20	
Halcyon Springs and District		1											1														1	
Hammond and District		12		3							15			17	1												25	
Hazelton and District																											33	
Hedley and District	3												1				8					3					12	

Invermere and District.....	1	1	7	6	2	25	2	15	1	1	7	6	2	3	3	154						
Kamloops and District.....	61	3				18	2	18	1	1				3		20						
Kaslo and District.....						5	1	34	2			1			14	79						
Kelowna and District.....	10	2	1		3	4	1	7								54						
Kimberley and District.....	33	1			6											104						
Kincolith and District.....					101											197						
Ladner and District.....	68		1		4	1	56	3	2			3				50						
Ladysmith and District.....	24		2		3	4	1	1								50						
Lake Cowichan and District.....	2		1		1	7		5								38						
Langford and District.....	3		1		3	19	13	3	2							14						
Langley Fort and District.....					26	1										41						
Langley Prairie and District.....					26	1										39						
Lillooet and District.....	5		1	1	96	1			6			1				99						
Lytton and District.....					1		3		2							5						
McBride and District.....																3						
Masset and District.....																3						
Mayne Island and District.....	2		2		12	2			3							21						
Merritt and District.....			1		14				1							71						
Michel and District.....						12										46						
Mission City and District.....	3				3	1	1	1	1							11						
Nakusp and District.....						1										6						
Nanaimo and District.....	58	20	3	4	66	2	3	17	14			1	1			200						
Nelson and District.....	11				3	286	94	20	3			2				419						
New Denver and District.....						16	4	10	13			10	2			21						
New Westminster and District.....	1	131	21	1	121	23	28	1	6	1						501						
Oak Bay and District.....	12			1				6				4				28						
Ocean Falls and District.....	1							4								7						
Oliver and District.....																13						
Parksville and District.....																4						
Penticton and District.....	20		1	2				39	2	5						72						
Port Alberni and District.....	6		2		7	2										24						
Port Alice and District.....					24	16										40						
Port Coquitlam and District.....																5						
Port Hammond and District.....																1						
Port Haney and District.....	16	1	21	6	1	20	8		1	3						85						
Port Moody and District.....	26		1			2	2									53						
Port Renfrew and District.....		4			3											12						
Port Simpson and District.....	3		1		11	4			3							19						
Pouce Coupe and District.....																1						
Powell River and District.....	2					1		7								78						
Prince George and District.....	5				65	1		11								96						
Prince Rupert and District.....	9		2		32	41	50	2	3							90						
Princeton and District.....	4		2			12		3	5							38						
Qualicum and District.....	7		1			3	18	1	2							50						
Queen Charlotte and District.....							13									19						
Quesnel and District.....						7		1								13						
Revelstoke and District.....	5		2			21	6									57						
Robson and District.....						4										5						
Rock Bay and District.....					6											7						
Rossland and District.....																203						
Saanich.....	101					195		8								405						
Salmon Arm and District.....	10		4			44	161	10	9							33						
Saltspring Island.....			1			7										75						
Sandown and District.....					14											14						
Selwyn Inlet and District.....						7										23						
Shawnigan Lake and District.....					21											14						
Sidney and District.....	2					27	2									43						
Carried forward.....	81199	80	159	52	4	2	54	175	1109	1	36	352	177	101	1	10	115	8	34	3	1148	7285

TABLE SHOWING RETURN OF CASES OF CONTAGIOUS DISEASES IN THE PROVINCE, JULY, 1929, TO JUNE, 1930—Continued.

	Cerebrospinal Meningitis.	Chicken-pox.	Conjunctivitis.	Diphtheria.	Dysentery.	Dysentery (Amoebic).	Dysentery (Bacillary).	Encephalitis.	Erysipelas.	German Measles.	Influenza.	Malaria.	Measles.	Mumps.	Paratyphoid Fever.	Poliomylitis.	Scarlet Fever.	Septic Sore Throat.	Smallpox.	Tetanus.	Trachoma.	Tuberculosis.	T.B. Meningitis.	Typhoid Fever.	Undulant Fever.	Whooping- cough.	Total.
Brought forward.....	8	1199	80	159	52	.....	4	2	54	175	1109	2	1416	1039	1	36	352	177	101	1	10	115	8	34	3	1148	7285
Smithers and District.....	.....	15	5	6	.....	.....	.....	.....	1	6	.....	.....	6	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	42
Sooke and District.....	.....	40	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	44
Squamish and District.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	8
Steveston and District.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	12
Stewart and District.....	.....	6	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	9
Summerland and District.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	30
Terrace and District.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	34
Tofino and District.....	.....	17	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	59
Trail and District.....	3	120	258	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	913
Ucluelet and District.....	.....	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	29
Vancouver.....	9	469	.....	485	.....	.....	.....	.....	79	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2330
Vancouver, North.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	137
Vancouver, West.....	1	26	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	100
Vanderhoof and District.....	.....	43	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	71
Vernon and District.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	88
Victoria.....	.....	41	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	620
Williams Lake and District.....	.....	233	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	4
Woodfibre and District.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	33
Yahk and District.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	27
Totals.....	21	2214	351	667	52	1	4	2	140	181	1224	2	2142	1688	11	42	616	191	157	1	10	376	8	70	3	1701	11,875

REPORT ON MEDICAL INSPECTION OF SCHOOLS.

PROVINCIAL BOARD OF HEALTH,

VICTORIA, B.C., December 1st, 1930.

The Honourable S. L. Howe,

Provincial Secretary, Victoria, B.C.

SIR,—Herewith I beg leave to hand you the Nineteenth Annual Report of the Medical Inspection of Schools for the Province of British Columbia.

Nothing succeeds like success, and I can truly apply this to the advances that are being made in the school-health work throughout the Province. Particularly are we sensible of the increasing interest taken by the School Boards.

When we began the work, we often found opposition from the people whom we hoped would have been our greatest helpers, and it was some time before, aided as we were by the efforts of the Women's Institutes, that we were able to convince officials that we were not simply trying to increase taxes, but that we were doing our best, and succeeding, in reducing taxes, and that the service that we were offering them, while on the face of it would apparently cost more money, would produce results financially, and more especially in keeping up school attendance and reducing expenditure by saving money by the diminution of the number of retarders. There has been a change in the picture, and now we find, in attending meetings, that whereas formerly the audience was made up of women with one or two lone men, now we find at least half of our audiences are men who are becoming increasingly interested in the work and give their time and lend their influence to carrying it on.

We are controlling epidemics through the work of our nurses, who are specially educated for their positions, and we do not permit of a school being closed unless an epidemic, which fortunately has not occurred, is of such proportions as to materially affect the attendance when it would be better to close. If a suspicious case develops, the nurse is there immediately, sends the child home, and examines into the home conditions and contacts, and the nurse repeats the visits to the school daily and contacts are watched. The result is there is no epidemic; one pupil may lose, after he has become infected with the disease, the time necessary to effect a recovery, but the class as a whole is saved from interruption of the work. In former years a few cases of scarlet fever or diphtheria would result in the closing of the school for two or three weeks, and any teacher will tell you that as far as the term is concerned the children have lost it. That means repetition and consequent expense. This does not occur now and medical men who closed the schools are very promptly informed that there is no necessity for this.

This has done more to attract the attention of officials than possibly anything else.

Our work is systematized under the various heads, and this is set forth very clearly in the report which follows of the work done in the Kelowna District, which is an outline of the work as carried out in the different districts of the Province:—

THE SECOND ANNUAL REPORT OF THE PROVINCIAL PUBLIC HEALTH NURSING SERVICE FOR THE KELOWNA RURAL DISTRICTS, JULY, 1929, TO JUNE, 1930.

I have much pleasure in presenting for the approval of the Kelowna Rural Schools Health Association the Second Annual Report of the Provincial Public Health Nursing Service for the Kelowna Rural Districts.

The report embraces all phases of school-work, child-welfare, and public-health organization in the Rural Districts of Okanagan Mission, Benvoulin, East Kelowna, South-east Kelowna, Rutland, Ellison, Winfield, Okanagan Centre, Westbank, Westbank Ferry, and Ewings Landing, an area of some 100 square miles, with an estimated population of approximately 3,625 adults, 725 school-children, and 360 pre school children.

In January, 1930, the work of the Westbank District was taken over by the Victorian Order of Nurses, leaving some 583 children entered during the year on the school registers for the remaining nine schools.

SECTION I.—SCHOOL-WORK.

The school-children have been regularly visited and inspected by the School Nurse during the year; records kept of defects found by the School Medical Health Officer in his examinations; home visits made to prevent the spread of communicable disease; the correction of defects and promotion of health; and health education given in the schools by personal talks to the child and class instruction. In co-operation with the teachers and parents, a Health Crusade has been organized in Okanagan Mission, Okanagan, East Kelowna, South-east Kelowna, and Rutland schools, in which 150 children have kept a daily chart of health chores done during a period of ten weeks. Two hundred and twenty-two Health Crusaders' badges have been distributed and many children have taken home their charts to work on in the summer holidays. In this way splendid health habits are inculcated which we hope will never be forgotten.

Three prizes were presented by Dr. G. A. Ootmar, S.M.O., to pupils in East Kelowna School and Rutland School for the best progress in healthy development due to the faithful keeping of health rules.

Number of visits to schools by nurse.....	233
Number of inspections of children by nurse.....	3,799
Number of weighings and measurings by nurse.....	1,167
Number of weighings (gaining).....	1,108
Number of weighings (underweight).....	221
Number of health talks given.....	89
Number of home school visits.....	178

School Medical Examination.

Number of children examined by doctor.....	561
New defects found	218
Old defects improved.....	361
Old defects not improved.....	260

An itemized account for each school of all defects is to be found in the classification report of the School Medical Officer.

Defects found Improved.

An interesting item is the number of defects found improved during the past year:—

Tonsils: 90 children found improved; 22 children had diseased tonsils taken out.

Teeth: 53 children went to the dentist.

Goitre: 43 children found improved.

Malnutrition: 22 children 7 to 10 per cent. underweight made gains from 4 to 12 lb.

Eyes: 8 children obtained glasses.

Much improvement has taken place in communicable skin conditions (pediculosis, impetigo, ringworm, and scabies); 19 exclusions (affecting 11 children) were made, as compared with 48 exclusions last year.

Defects which should be Improved.

Malnutrition and Underweight.—During the school-year there have been 66 children in our rural schools 10 per cent. and more underweight and 46 children from 5 to 10 per cent. underweight; 9 of these children have gained their normal weight for age and height, 66 have much improved in weight, and 21 children have not gained in weight. In spite of careful instruction and emphasis laid on proper weight by the giving of weight-tags, many children do not like milk and vegetables and refuse to take cod-liver oil or enough rest. When co-operation has been obtained the results have been excellent, some of the children gaining from 5 to 12 lb. in the nine months.

It is purposed next year to have a routine test for all persistently underweight children, as diabetes has been found by Dr. Ootmar to have been the cause in several of the children coming to the pre-school clinic.

In the dental survey, recently made by the dentists of Kelowna, 518 children were examined, and 359 were found to need attention for their teeth in the nine rural schools listed for underweight conditions. A large percentage of this work should be done on the permanent teeth. No doubt dental caries accounts for a certain amount of malnutrition among the children.

Underweight Children.

School.	Border-line, 5-10 per Cent. under.	Malnutrition, 10 per Cent. and over.	Not improved.	Improved.	O.K.
Winfield.....	4	4	4	4	....
Okanagan Centre.....	3	3	1	5	....
Ewings Landing.....	1	5	....	5	....
Rutland.....	16	25	8	24	4
Ellison.....	3	5	2	5	....
South-east Kelowna.....	1	2	....	1	....
East Kelowna.....	8	16	3	13	3
Okanagan Mission.....	7	3	3	5	2
Okanagan.....	3	3	....	4	....
Totals.....	46	66	21	66	9

Defects of Vision.

One hundred and nine children were found by the nurse to have defects of vision, ranging from a slight maladjustment to very serious defects.

It is purposed to hold an eye clinic at an early date under Dr. McNamee, the eye, ear, nose, and throat specialist of Kamloops. Children with the most serious defects will be attended to first of all, and we hope in time to have all defective eyes checked by the specialist.

In connection with the correction of defects, 145 notices were sent to parents, referring the children to their own physicians for care.

Communicable Diseases.

The rural schools have been remarkably free on the whole from communicable diseases during the school-year 1929-30.

Disease and School.	No. of Cases.
Measles—	
Okanagan	1
Rutland	3
East Kelowna	12
Winfield	4
Okanagan Mission	2
Diphtheria—Mission Creek	1
Scarlet fever—	
Mission Creek	1
Rutland	4
East Kelowna	2
Chicken-pox—Rutland	1
Whooping-cough—Ewings Landing	8
Total cases	39

Children in contact excluded from school numbered 36, and in the various districts a total of 95 cases and contacts were reported to the Medical Officer of Health, thus preventing the spread of disease and protecting other children. Nineteen throat-swabs were taken by the nurse of suspicious cases.

Our thanks are due to parents and school-teachers who co-operated with the health authorities by reporting cases and keeping quarantine. Only by the co-operation of every one concerned can the spread of communicable disease be prevented.

Campaign for Active Immunization against Scarlet Fever.

In November, 1929, a scarlet-fever epidemic of a mild type was prevalent in a city some 40 miles south of Kelowna. Schools were closed and the epidemic was spreading into the surrounding districts. Kelowna and districts, as central points in the valley, were daily in danger of infection. A campaign for active immunization against scarlet fever was organized in Kelowna and the surrounding districts.

The District Medical Health Officer and Rural Health Nurse addressed ten gatherings of parents in the rural districts. The Health Nurse explained the theory of active and passive immunity and the real meaning of "resistance" to disease; the Health Officer, the value of active immunization and the present need of protection. Some 1,800 pamphlets, written by the Health Officer, to be read and signed by parents, were distributed at the meetings and in the schools, the Health Nurse explaining the contents of the pamphlets to the teachers and older children. This pamphlet was also published in the *Kelowna Courier* through the courtesy of the editor.

The results were most encouraging. Very many parents gave their consent for their children to be protected by active immunization.

At the close of the campaign in February, 1930:—

In the Rural Districts 77 clinics were held; 562 children (school, pre-school, and infants) were tested by Dick test as to whether they were susceptible to scarlet fever; 1,957 inoculations of scarlet-fever toxin were given.

In the City of Kelowna 32 clinics were held; 688 children were tested for their susceptibility to scarlet fever; 1,931 inoculations of scarlet-fever toxin were given; 597 children completed their full five inoculations to obtain *complete* protection, and many others who were inoculated with three or four doses of toxin obtained a partial immunity to the scarlet-fever germ.

It is interesting to note that, though more than 100 cases of scarlet fever were reported and schools were closed in the city and districts where the epidemic originated, in the City of Kelowna twenty cases only occurred among children who had not been protected by immunization and nine cases in the rural districts.

When we think of the serious after-effects of scarlet fever on the heart and other organs of the body, it is a great satisfaction to know that so many of our local children have been protected.

Dental Survey in the Rural Schools.

A dental survey by Drs. Shepherd, Mathison, Wright, and Day was made in May, 1930, in the schools of Okanagan Mission, Okanagan, Mission Creek, East Kelowna, South-east Kelowna, Rutland, Ellison, Winfield, Okanagan Centre, Joe Rich Valley, Westbank, and Westbank Ferry. Five hundred and eighteen children were examined in the first ten schools, with the following results:—

School.	Children examined.	Found with Defective Teeth.	Cost of Work.
East Kelowna.....	46	41	\$387.00
South-east Kelowna.....	8	7	70.00
Okanagan Mission.....	41	25	206.00
Okanagan.....	38	29	275.00
Rutland.....	188	168	1,371.00
Ellison.....	31	29	181.00
Winfield.....	59	38	453.00
Okanagan Centre.....	17	13	109.00
Joe Rich Valley.....	15	9	31.00
Mission Creek.....	75	48	325.00
Totals.....	518	407	\$3,408.00

Of the 407 children found with defective teeth, 338 were found to have permanent teeth needing repair.

It was surprising to find the number of sixth-year molars which needed attention among the 7-year-old children. This first permanent tooth, which many parents think is a temporary tooth, is perhaps the most important tooth in the mouth. It is the cornerstone of the dental arch and has to last for very many years of life. It is *most important* that it should be preserved.

Three hundred and sixty-one individual dental cards with the results obtained by the survey were sent to parents, to be signed if they wished the work to be done. Fifty per cent. of these cards came back *unsigned*. Sixty-eight per cent. of the unsigned cards came back with letters from parents saying that they would much like the work done, but could not afford it. This

means that probably 50 per cent. of our children with defective teeth will not be in a position financially to have attention given to this most important work, which means so much to their health.

SECTION II.—CHILD-WELFARE.

Perhaps one of the most interesting and valuable phases of the work has been the development of the child-welfare programme during the past year. This has taken the form of free advisory clinics, in which the pre-school child and infant have been especially considered.

In such a large area it is impossible with one nurse on duty to find time to make as many home visits as we should like, but we are getting into touch with children and parents at clinics held in the various districts.

There have been a total of 1,240 children (school, pre-school, and infants) attending clinics during the past year, making a total of 3,241 attendances at 108 clinics in the rural districts alone.

Eighteen well-baby and pre-school clinics have been held in Rutland, Winfield, Benvoulin, and East Kelowna Districts under the auspices of the local Women's Institutes and Benvoulin Women's Club, with Dr. G. A. Ootmar as attending physician.

In addition to the clinic work, 109 advisory visits *re* feeding, etc., have been made by the Health Nurse, together with many letters of advice, instructional consultations over the telephone, and detailed written reports to the family physician.

Much time is taken arranging clinics, writing letters and reports, but the result is well worth while when we see the improvement in the babies and children.

There is a total of 131 children on the pre-school and infant register, 111 of whom have attended well-baby and pre-school clinics.

Other free clinics include chest, orthopædic, eye, ear, and nose and throat. Schick test to determine susceptibility to diphtheria; Dick test to determine susceptibility to scarlet fever; active immunization against scarlet fever; and school clinics of the dental survey.

Summary of Free Clinics held July, 1929, to July, 1930.

Type.	No.	Physician.	Children attending.	No. of Attendances.
Chest.....	2	Dr. Lamb, Government Chest Specialist.....	9	11
Eye, ear, nose, throat.....	1	Dr. McNamee, Specialist, Kamloops.....	12	12
Orthopædic.....	1	Dr. Frank Patterson, Specialist, Vancouver...	3	3
Schick test (for susceptibility to diphtheria).....	1	Dr. Ootmar, District M.H.O.....	25	25
Dick test and active immunization against scarlet fever.....	77	Dr. Ootmar, District M.H.O.....	562	2,519
Well-baby and pre-school.....	18	Dr. Ootmar, District M.H.O.....	111	153
Dental survey.....	8	Drs. Mathison, Wright, Shepherd, and Day...	518	518
Totals.....	108	.....	1,240	3,241

SECTION III.—PUBLIC-HEALTH ORGANIZATION AND DEVELOPMENT.

Meetings addressed.

- (1.) East Kelowna. Subject: Active immunization against diphtheria.
- (2.) Westbank. Subjects: (a) Active immunization against scarlet fever; (b) organization of a local branch of the Victorian Order of Nurses.
- (3.) Peachland. Subjects: (a) Active immunization against scarlet fever; (b) organization of a local branch of the Victorian Order of Nurses.
- (4.) South-east Kelowna. Subject: Active immunization against scarlet fever.
- (5.) Benvoulin. Subject: Active immunization against scarlet fever.
- (6.) Mission Creek. Subject: Active immunization against scarlet fever.
- (7.) Rutland. Subject: Active immunization against scarlet fever.
- (8.) Winfield. Subject: Active immunization against scarlet fever.
- (9.) Ellison. Subject: Active immunization against scarlet fever.
- (10.) Okanagan Centre. Subject: Active immunization against scarlet fever.
- (11.) Kelowna Women's Institute. Subject: "The Kelowna Health Unit—Its Organization and Aims."

Letters written, Interviews, and Prenatal Hygiene.

Letters written: 155. Interviews: 420.

Prenatal hygiene: Cases opened, 4; number of visits, 11.

Health Exhibit.

A health exhibit for the Kelowna Fall Fair of 1929 was planned in conjunction with Miss Frances Lyne, R.N., Kelowna School Nurse. In the school section a proper lunch for a school-child was demonstrated by means of food models supplemented by suitable posters and literature. In the infant-welfare section stress was laid on the importance of properly modified cow's milk for feeding, as compared with condensed milk, which is a favourite standby of rural mothers. Models were used, together with large posters showing a letter from Dr. Alan Brown, well-known pediatrician of Toronto, Ontario, supplemented by a copy of his well-known book, "The Normal Child," and other suitable literature.

In the public-health section attention was called to the free Government chest clinics by suitable posters and literature. The need of vaccination was stressed by striking posters "adorned" with real photographs of different types of smallpox taken from "Vaccination and Smallpox," obtained from the Federal Department of Health, Ottawa. These aroused much interest and many copies of this publication were distributed, together with some 3,350 booklets dealing with various health subjects.

Many questions were answered by the two city and rural nurses who were on duty at the booth during the one and a half days of the fair.

The Kelowna Rural Schools Health Association, Kelowna Women's Institute, and the Kelowna Board of School Trustees contributed towards the expenses of the booth.

Other Activities.

(1.) In April, 1930, the Westbank Well-baby and Pre-school Clinic was opened under the auspices of the newly formed Westbank Branch of the Victorian Order of Nurses. Dr. G. H. Ootmar was the attending physician, assisted by Miss Olive Ings, R.N., Victorian Order Nurse in charge; Mrs. A. F. Grindon, R.N., Provincial Health Nurse, Kelowna; and the members of the local branch of the V.O.N. Thirty-four infants and children were present at a well-attended clinic. In May and June clinics were also held at which the Provincial Health Nurse assisted the Victorian Order Nurse in charge.

(2.) In co-operation with Dr. Frank Patterson, orthopaedic specialist, Vancouver, an attempt is being made to send two of our local children suffering from the results of infantile paralysis to Vancouver for treatment. Free transportation has been obtained from the Canadian Pacific Railway. Dr. Patterson, when visiting in Kelowna, very kindly examined these children and we hope that splendid results will follow the treatment.

VISITORS TO THE DISTRICT.

(1.) Mrs. Appleton, from the Royal Alexandra Solarium on Vancouver Island, arrived in Kelowna in April to visit old patients and prospective patients. She was much pleased by the continued progress at home made by one of our local children, who through the kindness of the Rutland Women's Institute was enabled to spend some years under treatment at the Solarium. Another child assisted by the same institute is to come home soon after a year's treatment, very greatly improved. This is splendid work that the institute is doing to help the children.

(2.) Miss Margaret Kerr, B.A.Sc. (British Columbia), A.M. (Columbia), Instructress in Public Health Nursing at the University of British Columbia, visited the district in May on a visit of observation. Miss Kerr has been making a tour of the public-health centres of the Province, and expressed herself as much pleased with the child-welfare work being done in the Kelowna Rural Districts.

(3.) The Provincial Health Officer was a most welcome visitor in Kelowna in April. He interviewed many local people interested in health matters, and as a result of his visit we were able to organize the dental survey of the rural schools, a report of which will be found in the school section of the report.

To conclude, I would express my appreciation and thanks to the local physicians; to the members of the Women's Institutes; to the Executive of the Kelowna Rural Schools Health Association; to the teachers in the schools; to Dr. G. H. Ootmar, District Medical Health Officer,

and School Medical Officer for the rural schools; and to all others who by their kindly interest and co-operation are helping to promote the work of the Provincial Public Health Nursing Service in the Kelowna Rural Districts.

ANNE FRANCES GRINDON, R.N.,
Provincial Health Nurse in Charge, Kelowna Rural Districts.

Following are the reports from the full-time Medical Health Officers in Saanich Municipality and Kelowna City. The Saanich report gives us a résumé of the work carried out, including the school-work. The Kelowna report deals more particularly with the work as Medical Health Officer in reference to the work in general.

SAANICH FULL-TIME HEALTH UNIT.

In reply to the many requests received from widely separated parts of the country, we are publishing for the first time a full description of the history, organization, and results accomplished by the Saanich Health Centre from the time it became a full-time unit. The directors of the centre have been frequently criticized for not seeking more publicity for the work of the centre and for not putting on a more attention-drawing programme. It has been the belief of the centre that work along public-health lines carried on continuously produces greater and more lasting results than much energy spent to make a few splashes, the memory of which is soon a thing of the past. Now that the centre is entering upon its fourth year, we feel that our policy has been justified and that we have concrete data on the benefits of organized public-health work as evidenced by improved health, fewer cases of infectious disease, more public-health education, and decreased costs to the municipality. The great impetus to public health was given by the war, which opened the eyes of the world to the appalling number of men unfit for service due to defects which may have been corrected in childhood. Since then research has shown that in Canada alone the annual cost to the nation of preventable disease is in excess of one hundred million dollars. This does not take into consideration the cost of invalidism due to causes preventable in childhood, or the cost of State institutions for the care of defectives. This does not take into consideration the infant and maternal mortality due to preventive causes and lack of education.

The realization by our public men that conservation of health is just as important as conservation of natural resources, even more so, has initiated public-health programmes throughout the country. In 1919 public-health work was begun in Saanich with the employment of four nurses to carry out bedside and school nursing. There were also a part-time Medical Officer of Health and School Medical Officer who worked independently of each other and under separate governing bodies. As frequently occurs under such arrangements and without co-ordination, the health-work was incompletely carried out and at too great a cost for the results accomplished. Gradually, however, through education and the untiring efforts of the municipal leaders and the Provincial Health Officer, appreciation of the possibilities of public-health work was brought to such a stage that a demand for an efficient full-time unit as opposed to the inefficiency of part-time work resulted in the organization. In September, 1927, the School Board and the Municipal Council pooled their health activities under a single control and a full-time health unit began to function with the same number of nurses on the staff and a full-time Medical Officer.

A comprehensive survey of the district and schools was made and the following conditions found:—

Saanich is a rural and suburban district about 55 square miles in area and 14,000 inhabitants. The great majority of the population is comprised of wage-earners living near the city. The rural areas are intensely farmed. There are over 180 dairies supplying the district and the city. Other industries are conspicuous by their absence.

Infectious diseases were prevalent owing to a loose control, and as a result schools were frequently closed on account of epidemics. Attendance at the schools was poor for the same reason. For the above reasons it was decided to direct attention to the control of communicable diseases and improvement of the health and supervision of the school population, which has since increased from 1,900 to 2,200. The environment of the school-children was carefully examined and errors in lighting, heating, and sanitation were pointed out and corrected. We

next turned our attention to the school population and upon examination of their health-cards were impressed by their health and apparent freedom from defects such as are found elsewhere. This we soon learned was due to the fact that under the part-time system the children were hurriedly inspected at the rate of about 250 in a single morning. We now proceeded to examine each child as thoroughly as possible, and whereas in the previous year only 562 defects were found, we located 1,977, and secured the correction of 989, as compared with the correction of 80 in the previous year. Every parent is notified of these defects and the correction urged, often necessitating five or six visits by the nurse. So well, apparently, has this medical examination and the nurses' work and child-welfare work succeeded that this year only 371 defects have been found. In fact, the beginners' class of last year showed 40 per cent. fewer defects than any beginners' class in previous years. Our schools have a dentist who has a portable outfit and moves from school to school; excellent results have been obtained with little loss of time to pupils.

This certainly means that the children of to-day will be entering upon adult life with fewer handicaps than their parents and are assured of a better and more efficient life.

We now turned attention to controlling infectious diseases and lessening their cost to the municipality and decreasing the absenteeism of children for this reason. This necessitated frequent inspection by the nurses, and the following figures show what has been done:—

Children inspected—

1926	1,517
1927	1,649
1928 (full-time unit)	8,164
1929	9,022
1930	5,968

We next ruled that every child absent from school three days or longer must be visited by a nurse and then present a certificate signed by the Medical Officer before readmission. From this we have as complete a knowledge and control of infection as is possible. Under nursing supervision the children are allowed to attend school during the incubation period of a disease, thus saving time which under another system would have been lost. The teachers co-operate and send home every child that shows suspicious symptoms. As a result the number of infectious diseases dropped markedly and the attendance increased in the manner shown in the chart appended.

PERCENTAGE OF ATTENDANCE OF ENROLLED PUPILS, SAANICH SCHOOLS.

School-year.	Sept.	Oct.	Nov.	Dec.*	Jan.*	Feb.*	March.	April.	May.	June.	Aver- age.
											%
1924-25.....	93.08	89.1	88.1	85.3	84.3	79.7	76.8	74.7	74.02	74.1	81.94
1925-26.....	94.3	89.7	90.3	88.7	80.2	77.8	76.7	79.4	76.8	75.9	83.98
1926-27.....	93.3	91.3	87.2	84.2	78.4	79.9	81.7	77.7	79.2	76.9	82.98†
1927-28 (full-time unit).....	93.5	91.6	93.2	89.2	91.2	92.4	92.9	92.8	95.8	92.2	93.48†
1928-29.....	94.7	93.9	92.5	93.3	88.6‡	90.5	94.01	93.6	90.8	92.9	92.48
1929-30.....	94.7	93.1	92.9	94.1	87.6	88.3	93.0	93.2	93.2	93.8	92.40

* Winter colds, measles, etc.

† Strawberry-picking.

‡ Flu.

Fifty per cent. of defects corrected of pupils. Pre-school. Entrance this year 40 per cent. less defects than any previous Entrance class.

At the same time the costs of isolation in the hospital, which were borne by the municipality, toboganned as follows:—

1925	\$2,110.00
1926	5,535.00
1927	1,181.00
1928 (full-time unit).....	140.00
1929	795.00
1930	350.00

(The increase for 1929 is due to the isolation of a diphtheria carrier.)

From this point alone the Health Centre has justified its establishment. As a result of our efforts to decrease disease we have in the past two years immunized 600 children against diphtheria, and we are very pleased to report that not a single one of these, though exposed, has contracted diphtheria. The improvement in attendance has raised the scholastic achievement of the pupils, and from the report of the Municipal Inspector of Schools we read that "while the tardation has cost Saanich over \$17,000 in 1928, last year (that is, 1929) the cost of repeaters has been kept down to \$11,000."

Our next effort was directed to the pre-school population. We have registered about 850 children who receive frequent visits by the nurses, and the mothers are given regular instruction in their care and protection. Wherever the members of the staff visit they always leave some public-health education. This has gradually resulted in the lessening of sickness, as shown by the ever-decreasing bedside-nursing visits and the increasing number of visits along preventive lines such as child-welfare and home school visits. The following table illustrates this well:—

Year.	Nursing Visits.	Child-welfare Visits.	Home School Visits.
1926.....	2,893	1,714	200
1927.....	2,966	1,360	148
1928 (full-time unit).....	2,355	1,979	1,314
1929.....	1,853	2,200	3,015
1930.....	1,721	1,946	2,055

We now have three baby clinics a month where mothers receive instructions and the babies undergo thorough examination. This year we have also established a pre-school dental clinic which has proved a great success.

Along educational lines, in addition to our work in the homes, we have introduced a standard text-book which has been adopted in our schools, and regular instruction is given in all the grades and high school. Children are encouraged to give self-expression along public-health lines by means of posters and essays, for which six prizes in the grade schools and two prizes in the high school are offered. Physical education and sports are given attention. Classes in home-nursing are given where practicable. Addresses to various organizations are given too. Demonstration or exhibit of some phase of public health is given whenever possible. Along the lines of sanitation we have achieved considerable success. We have carried out regular inspections and improvement of the many summer resorts located in Saanich. The dairies, of which there were only thirty registered prior to the establishment of the full-time Health Centre, have now been brought under an efficient supervision by the Health Centre, no licence being granted unless the sanitation and the safety of the supply is approved by the Health Officer. One of our great problems—that is, sewerage—has been receiving considerable attention in the past two years and much improvement is noted. This year an addition to the staff of a Sanitary Inspector, who is also Building Inspector, has been made.

Taken as a whole, the establishment of the Health Centre and its present appreciation by the municipality is something that those responsible for the organization of public health in this municipality may be justly proud of.

D. BERMAN, M.D., D.P.H.,
*Medical Officer and Medical School Inspector,
 Saanich Municipality.*

KELOWNA HEALTH UNIT.

TYPHOID CARRIERS.

It was our experience of the last four years that when typhoid epidemics occur in Kelowna and district they were always strangers who fell ill first. In January we had a case of typhoid in a family residing in Rutland District for a few months. In April a man who came from the Prairies died. In August we had a case of typhoid in a girl coming from Winnipeg (six weeks ago), and one case, which is still in the hospital, is in a child whose family came lately

to Kelowna. A woman coming in March from the Prairies was for months in the hospital. All cases (except the one from Winnipeg) were traced to contact with typhoid carriers, some of whom have lived in the valley for a long time. The man, who died in April, was, after his arrival from the Prairies, living close to his sister, who had typhoid years ago. I told the woman to be careful, but the supply of domestic water to a family near by whose well was dry was the cause of the disease in the woman, who came in March from the Prairies.

We have now listed thirteen carriers—two in Rutland and two in Glenmore (cause of two cases, one death), one in Okanagan Mission (one case, one death), and seven in Kelowna, of which one is still employed in a restaurant.

As I have no power to forbid a carrier being employed in a restaurant, I promised the restaurants which did not employ a carrier a clean bill of health, refusing one to the restaurant which still employs a carrier and to which two cases were traced. I certainly hope that we will find a way to prohibit the carriers to be employed in restaurants.

The macroscopical widal was of great value in detecting carriers, followed by a culture of fæces and urine.

We are trying now to get the history of a carrier by testing his blood, fæces, and urine at weekly intervals. It is of very little value to detect carriers when we are unable to control them. This is impossible without proper help. Being overloaded with work in the laboratory and in the field as Health Officer, a Sanitary Inspector is badly needed. He would have to control the carriers, take regular blood and fæces samples, and supervise the dry closets. There are over 400 dry closets in town, unprotected against flies; the contents are emptied about once a month without being disinfected.

CARRIERS.

Mrs. G.—Had typhoid fifteen years ago, when she lived on the Prairies. A few months after she came to Kelowna her daughter, 11 years old, developed typhoid. Widal's were taken from the whole family, and *Mrs. G.* was found to be positive in agglutination and complement fixation test and also had a positive fæces culture. Two weeks afterwards she entered the hospital with tubair pregnancy. She left the hospital with a still positive agglutination test, but with negative fæces culture.

Mrs. W.—Had typhoid twenty-two years ago. She was positive in blood and fæces. Her brother, who came from the Prairies, developed typhoid and died. Several months later a woman, who got temporarily her drinking-water from the farm where *Mrs. W.* is living, developed the disease.

Miss B.—Waitress in a hotel. Was positive in agglutination and fæces. Her father, a milk-dealer, Grade A, in whose house the girl lived, delivered milk to a patient with a lung abscess. The patient fell ill with typhoid and typhoid germs were cultivated from the milk.

Mrs. W.—Waitress in a hotel. Had typhoid twelve years ago. Some months ago typhoid cases occurred in the hotel (a newly arrived porter and his wife). She was strongly positive for typhoid, with negative fæces culture.

Miss S.—Waitress in a restaurant. Had no history for typhoid. Was repeatedly found positive for typhoid, with negative fæces culture. In the same restaurant was found a cook, positive in blood and fæces. He returned to China.

Mr. M.—Entered the hospital on December 29th. Was found positive in blood and fæces and was the cause of a case of typhoid in the district in August. He reported every fourteen days, but escaped from control and acted as a cook in a lumber camp, where ten cases of typhoid occurred.

Mrs. A.—Was found to be a carrier in July. There was a history of typhoid fourteen years ago. In August there was one death from typhoid in that part of the district, due to contact with the carrier. There are at present thirteen known typhoid and one paratyphoid carriers residing in Kelowna and district. These carriers have to be visited at regular times, and specimens of blood and urine have to be taken. Systematic educational propaganda should be made to make people understand how to protect others.

SANITARY CONDITIONS.

The sanitary conditions in canneries and packing-houses are asking loudly to be improved—changing the dry closets into water-closets, with facilities to wash hands, etc.

CANNERIES.

In the canneries 200 women stood ten and more hours (sometimes twelve) without an opportunity to sit down. It is true that when asked to be allowed to sit down it was never refused, but the few chairs that were present were far too few to comply with the demand. I ordered a box to be placed near every woman, allowing her to sit down when she wished.

EXHIBITS.

The Health Centre conducted exhibits at six country fairs—Armstrong, Westbank, Kelowna, Peachland, Okanagan Falls, and Oliver—as well as at the Hospital Convention at Vancouver. The results of these exhibits were found to be far-reaching and stimulated widespread interest in prevention of disease, and the Health Centre has already been asked to exhibit next year at several country fairs.

SEPTIC SORE THROAT.

An outbreak of septic sore throat occurred in Kelowna, due to the use of raw milk. Two cows of the herd were found to have streptococcic mastitis. The bacterial count of the milk was 800,000. Immediately the milk was ordered to be pasteurized.

VENEREAL DISEASE.

The educational work that we have been enabled to do has consisted in the distribution of literature dealing with the entire venereal-disease question. We intend to give lectures dealing with this to different groups. The minister of the United Church has invited us to speak about this disease to the oldest boys and we are arranging a date when these lectures will be held.

LECTURES.

Several lectures for parents were held, when smallpox cases in the neighbourhood made it urgent to vaccinate children. Two lectures for adults dealing with this matter were held. The Rotary Club of Kelowna was also addressed. The subject was: "The Fate of the Typhoid Carrier"; and one we held in Vancouver for the British Columbia Hospital Association in joint meeting, with the name: "The Forgotten Room."

This last lecture dealt with the fact that many hospitals have very restricted laboratory facilities (often only one bottle of nitric acid and two with Fehling's solution), and with the fact that in our small laboratory we started a training-school for laboratory aids.

BABY CLINICS.

During the months of July and August the baby clinics were suspended, partly on account of the absence of the Health Nurses and partly due to the fact that the busy times for the mothers come in these months and the attendance would be very small. However, the children who needed supervision, and for whom it was not advisable to do without this, were visited at home each month.

As a rule, we have two afternoons each week occupied with baby clinics; seldom is the attendance less than ten—sometimes we have about thirty attendants. In my yearly report I shall give a more complete report on these clinics, which are of great value, as several times a slight defect was found and soon corrected which would have been hard to correct in later years. Two children at the age of 2 and 3 were found to suffer from diabetes and referred to their family physician.

VACCINATION CLINICS.

These were held the end of July and the beginning of August in all parts of the district and for a week each day in the city. A total of 385 persons were vaccinated, of whom eighty-three were revaccinated. Two cases due to anaphylaxis occurred. One was a veterinarian who as a child was immunized by milking cows with smallpox pustulæ on the udder; one was a farmer who was several times revaccinated (last time without result).

G. A. OOTMAR,

*Medical Officer and Medical Inspector of Schools,
Kelowna.*

Much interest is being shown in regard to the dental work, and we are very pleased to say that we have made arrangements with the Canadian Dental Association to carry out a survey of the Province as a whole. This will be given effect to in March, 1931. The British Columbia Dental Association is sponsoring this work and it is to be financed without expense to the Province, but by Federal grant and by grants from the insurance companies of Canada.

A complete survey will be made of the school-children. Two days' free service will be given by the dentists to demonstrate the work in each district. All organizations in the district will be asked to form a committee to assist in carrying this out, and we believe that, as an educational measure, this is one of the greatest things that we have as yet attempted. Particularly we would appeal to those who read this Report that, when the time comes, they will lend their assistance in helping us.

Details for the examination for each school follow.

I have, etc.,

H. E. YOUNG,

Provincial Health Officer.

SCHOOLS INSPECTED.

Medical Inspectors: 163.

Reports from Medical Inspectors: 161.

HIGH SCHOOLS.

High schools. 1928-29, 67: Reported, 38; not reported, 29. 1929-30, 67: Reported, 43; not reported, 24.

Pupils inspected: 1928-29, 9,725; 1929-30, 10,759; an increase of 1,034.

JUNIOR HIGH SCHOOLS.

Junior high schools. 1928-29, 4: Reported, 2; not reported, 2. 1929-30, 5: Reported, 3; not reported, 2.

Pupils inspected: 1928-29, 3,065; 1929-30, 4,568; an increase of 1,503.

GRADED CITY SCHOOLS.

Cities. 1928-29, 33: Reported, 32; not reported, 1. 1929-30, 33: Reported, 32; not reported, 1.

Pupils inspected: 1928-29, 48,898; 1929-30, 48,860; a decrease of 38.

RURAL MUNICIPALITY SCHOOLS.

Municipalities. 1928-29, 24: Reported, 23; not reported, 1. 1929-30, 24: Reported, 23; not reported, 1.

Pupils inspected: 1928-29, 16,030; 1929-30, 16,925; an increase of 895.

RURAL AND ASSISTED SCHOOLS.

Schools inspected: 1928-29, 654, at a cost of \$15,255.65; 1929-30, 663, at a cost of \$15,755.40.

Schools not inspected: 1928-29, 71; 1929-30, 106.

Pupils inspected: 1928-29, 18,318; 1929-30, 18,391; an increase of 73.

Cost of inspection per pupil: 1928-29, 83 cents; 1929-30, 85.6 cents.

Percentage of defects: 1928-29, 103.13; 1929-30, 104.24; an increase of 1.11.

STATISTICAL TABLES.

NORMAL

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Vancouver.....	L. Macmillan.....	.....	221	230	.....	.....	14	2	3	7	19	27	6	14
Victoria	J. H. Moore.....	.....	140	141	11	.....	19	1	.....	.....	22	9	.....	1

HIGH

Abbotsford.....	J. M. McDiarmid.....	.....	68	63	3	.....	6	.....	2	2	5	9	3	15
Anyox:														
Granby Bay.....	Dr. Learoyd.....	Mrs. Edward Yard.	23	23	.....	.....	2	.....	1	.....	.....	2	.....	12
Armstrong.....	.....	Miss P. Charlton..	105	103	1	.....	6	1	4	5	18	39	2	40
Bella Coola.....	H. A. McLean.....	.....	22	22	2	1	3	1	6	15	15	15	15	9
Burnaby:														
Burnaby, North.....	J. G. McCammon.....	.....	146	145	.....	.....	7	.....	.....	1	5	39	4	3
Burnaby, South.....	J. G. McCammon.....	.....	334	319	.....	.....	10	1	.....	.....	14	110	7	16
Chilliwack.....	L. A. Patton.....	.....	285	285	2	.....	11	1	10	10	23	15	20	20
Courtenay.....	J. McKee.....	.....	75	68	.....	.....	3	1	.....	4	4	3	.....	7
Cranbrook.....	G. E. L. MacKinnon.....	.....	170	170	.....	.....	9	.....	.....	.....	6	9	.....	7
Cumberland.....	G. K. MacNaughton.....	.....	50	49	4	1	2	2	3	1	3	9	8	2
Delta:														
King George V.....	A. A. King.....	.....	89	89	.....	.....	4	.....	2	2	7	.....	.....	.....
Duncan.....	H. P. Swan.....	Miss B. Mitchell..	94	88	5	.....	10	.....	.....	1	2	.....	.....	.....
Esquimalt.....	J. S. McCallum.....	Miss E. Morrison..	73	73	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Fernie.....	D. Corsan.....	Miss W. Seymour..	112	112	3	.....	1	.....	.....	.....	3	3	2	3
Grand Forks.....	W. Truax.....	.....	75	75	.....	.....	2	.....	.....	.....	2	3	2	.....
Kelowna.....	W. J. Knox.....	Miss Tisdale.....	179	179	.....	.....	11	1	3	1	3	5	1	7
Kimberley.....	J. F. Haszard.....	.....	58	57	.....	.....	.....	.....	.....	2	14	8	.....	5
Ladysmith.....	H. B. Maxwell.....	Miss H. Peters.....	60	57	.....	.....	5	.....	2	2	9	6	.....	4
Langley.....	B. B. Marr.....	.....	97	94	.....	.....	6	.....	.....	.....	1	.....	.....	2
Manle Ridge:														
McLean.....	.....	Miss H. E. Fawcett..	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Merritt.....	G. H. Tutill.....	.....	50	48	.....	.....	1	.....	.....	.....	4	5	1	6
Mission.....	Dr. McIntyre.....	Miss H. E. Fawcett..	59	59	14	.....	3	.....	2	.....	4	13	3	8
Nanaimo.....	W. F. Drysdale.....	Miss N. Armstrong	247	240	33	.....	18	3	6	6	4	80	7	24
Nelson.....	E. C. Arthur.....	.....	227	214	.....	.....	24	4	1	1	19	33	.....	56
New Denver.....	A. Francis.....	.....	21	20	.....	.....	1	.....	.....	.....	1	.....	20	13
New Westminster:														
Duke of Connaught.	D. A. Clark.....	Miss A. Stark.....	418	406	9	.....	16	1	1	30	30	.....	14	60
Ocean Falls.....	P. P. Smyth.....	.....	27	25	2	.....	5	.....	.....	.....	5	2	.....	1
Peachland.....	Wm. Buchanan.....	Miss M. Twiddy.....	6	6	.....	.....	.....	.....	.....	.....	.....	.....	.....	4
Prince Rupert.....	G. H. Carson.....	Miss M. Osborne..	193	190	31	.....	19	30	56	.....	65	27	28	14
Queen Charlotte.....	G. A. C. Roberts.....	.....	11	11	.....	.....	.....	.....	.....	.....	.....	1	.....	.....
Revelstoke.....	J. H. Hamilton.....	.....	146	146	.....	.....	16	.....	.....	.....	4	1	.....	4
Richmond.....	W. K. Hall.....	.....	116	90	.....	.....	5	.....	.....	.....	3	.....	.....	7
Saanich.....	D. Berman.....	Miss E. Naden.....	132	132	.....	.....	.....	2	.....	.....	14	25	12	29
Salmon Arm.....	Drs. Beech & Beech..	.....	83	80	8	.....	12	3	2	2	8	8	3	10
Slocan City.....	A. Francis.....	.....	9	8	.....	.....	1	.....	.....	.....	.....	.....	7	7
Smithers.....	F. V. Agnew.....	.....	36	36	.....	.....	.....	.....	.....	.....	4	.....	.....	2
Surrey.....	F. D. Sinclair.....	.....	92	92	.....	.....	1	.....	.....	.....	.....	.....	.....	1
Terrace:														
Kitsumgallum.....	R. B. Brummitt.....	.....	30	30	.....	.....	2	1	.....	.....	6	4	1	3

SCHOOLS.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Scarlet fever, 4; eczema, 4; fractures, 3; rheumatic hearts, 2; nervous break-downs, 3; pneumonia, 10						Heating, ventilation, and accommoda- tion, good	Yes.
Pulmonary, 2; heart-murmur, 2; ton- sils incompletely removed, 2; acne, 2; rickets, old, with deformed chest, 1; deformed wrist (old fracture), 1; students not allowed to register (due to defective vision that could not be corrected), 1			1			Good.....	Clean; adequate.

SCHOOLS.

Bright's disease, 1; cystic goitre, 1					Chicken-pox, 2	Satisfactory..... Hard to heat in cold weather	Yes. Clean; adequate.
Corrected vision, 4						O.K.....	O.K.
Orthopædic, 1; heart, 2; corrected vision, 22						Good.....	Yes.
Nervous, 2; cardiac, 2					Mumps; measles; scarlet fever; chicken-pox	Good.....	Clean; adequate.
Diabetes, 1					Epidemic mumps	Fair ventilation not overcrowded	O.K.
Cardiac, 1						Good.....	Clean.
Anæmia, 5						O.K.....	Clean; adequate.
Fatigue posture, 41; asthma, 1		1			Mumps, 47; measles, 5	Good.....	Good.
Cardiac, 2		1	1		Measles, 10	General conditions excellent	Twelve; clean; adequate.
Nervous threatening choræa, 1; chronic bronchitis, 2; cardiac, 2; flat feet, 4; psoriasis, 1			5	5	Mumps, 2; chicken-pox, 1; ton- sillitis, 2	O.K.....	O.K.
Stiff knee, old osteomyelitis					Mumps, 1; chicken-pox, 1; ru- bella, 6	Good.....	Clean; adequate.
Defective chests, 4; cardiac, 3					Smallpox	Overcrowded in two rooms, which will be relieved next term by use of Junior High build- ing; heating good; ventilation good; building in good repair	Sanitary; modern; adequate.
Eczema, 1; pulmonary, 1; pyorrhea, 1; cardiac, 1; orthopædic, 2					Measles, 2; scarlet fever, 2	Well ventilated and heated	Yes.
Cardiac, 2					acute appendix, 2		Efficient. Clean.
Cardiac, 2; stuttering, 1				1	Mumps, 6	Good.....	Good.
Orthopædic, 5; heart-defects, 5; ana- mic, 2; pulmonary, 1					Whooping-cough (held in con- trol by keeping affected from school)	Satisfactory.....	Yes.
Pneumonia, 1						Good.....	Good.
Heart, 15; acne, 8; eczema, 1					Scarlet fever, 1; chicken-pox, 2	Poorly heated and ventilated	Clean; adequate.
Cardiac, 3; conjunctivitis, 2					Varicella and measles	Crowded when more than 30 in class	Good.
Cardiac, 4; nervous, 2; orthopædic, 2						Good.....	Good.
Cardiac, 1						Good.....	Good.
Cardiac, 6						Good.....	Yes.
Cardiac disease, 1						O.K.....	Clean.
				2	Mumps, 1; chicken-pox, 1	Good.....	Good.
						Good.....	Good.
						Good.....	Yes.
						Satisfactory.....	Good.
						Fair.....	Clean; adequate.

HIGH

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Topley.....	F. V. Agnew.....	.....	6	6			1					1		
Trail.....	F. S. Eaton.....	.....	183	183	9		18	2	3	3	4	23		14
Vancouver:														
Britannia.....	H. White.....	Miss M. McLellan.....	106	671			25	1			9	171	2	11
Lord Byng.....	W. Dykes.....	Miss G. Jeeves.....	366	500			28				8	102		30
King Edward.....	H. White.....	Miss M. MacNaughton.....	640	729			30	1	1		13	118	6	26
King George.....	H. White.....	Miss H. Jukes.....	367	400			22	1	1		2	108		16
Kitsilano.....	H. White.....	Miss M. Campbell.....	371	348			28	1	1		6	33	3	20
Magee.....	W. Dykes.....	Miss M. Ewart.....	749	647			56	6			18	90	1	61
John Oliver.....	G. Lamont.....	Miss E. Edwards.....	812	986			49		1			235		31
Prince of Wales.....	W. Dykes.....	Miss L. Drysdale.....	228	170			7		1		3	24		15
School of Commerce.....	H. White.....	Miss M. MacNaughton.....	550	537			19	1	1		19	116	5	33
Technical.....	G. Lamont.....	Miss I. Smith.....	892	1036			14		4		7	126	2	3
Vancouver, North.....	H. Dyer.....	Miss E. Lowther.....	358	377	2		18				14	4	3	1
Vancouver, West:														
Inglewood.....	A. C. Nash.....	.....	129	127			4				10	20	3	4
Vernon.....	O. Morris.....	Mrs. I. Martin.....	140	138							1			1

JUNIOR HIGH

Kamloops.....	M. G. Archibald and and K. Terry	Miss O. M. Garrood	318	292	51		22		5		50	51	54	16
Nelson.....	E. C. Arthur.....	.....	349	307	3		30	1	1		28	86	2	69
Vancouver:														
Fairview.....	H. White.....	Miss M. MacNaughton.....	175	154			12	3	1		4	44	2	8
Kitsilano.....	H. White.....	Miss M. Campbell.....	1546	1620	247		74	7	3	1	62	446	14	20
Point Grey.....	G. Lamont.....	Miss M. Ewart.....	1231	896	196		68	7		2	45	164	4	64
Templeton.....	H. White.....	Miss V. B. Stevens	1307	1299	265		84	22	16	1	94	430	11	125

GRADED CITY

Alberni.....	A. D. Morgan.....	.....	114	106			2			3	16	40	4	16
Armstrong.....	.....	Miss P. Charlton.....	512	507	19	4	36	20	60	75	218	244	58	163
Chilliwack.....	R. McCaffery.....	.....	406	399	7	4	23		2	86	94	72	7	41
Courtenay.....	J. McKee.....	.....	273	248			4	1	15	38	33	75		11
Cranbrook:														
Central.....	G. E. L. McKinnon.....	.....	556	539			50				105	57	2	9
South Ward.....	G. E. L. McKinnon.....	.....	46	45			2				14	6		
Kootenay Orchards.....	G. E. L. McKinnon.....	.....	12	12			1				2	1		
Cumberland.....	G. R. MacNaughton.....	.....	417	407	58	3	18	7	28	27	193	278	188	14

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Anæmia, 1						Good.....	Yes.
Cardiac, 4; nervous system, 2						Adequate.....	Yes.
No. vaccinated, 440; cardiac affec- tions, 2; pulmonary, 1							
No. vaccinated, 254; cardiac affec- tions, 3					Mumps, 2; chicken-pox, 1		
No. vaccinated, 427; cardiac affec- tions, 2							
No. vaccinated, 246; pulmonary, 1							
No. vaccinated, 193							
No. vaccinated, 409; cardiac affec- tions, 10; pulmonary, 1					Scarlet fever, 1; measles, 1; mumps, 17		
No. vaccinated, 341; cardiac affec- tions, 4					Diphtheria, 1; chicken-pox, 3		
No. vaccinated, 81; cardiac affec- tions, 7					Mumps, 1		
No. vaccinated, 332; cardiac affec- tions, 4; pulmonary, 1							
No. vaccinated, 542; cardiac affec- tions, 2							
Cardiac, 4; nervous, 1					Mumps, 4		
Skin-trouble, 2						Good.....	Both.
		3			Influenza, 5	Fair.....	Clean; not ade- quate.

SCHOOLS.

Heart, 3; bronchitis, 2					Few cases measles and chicken- pox	Is a new brick building attached to former High School, com- prising one large assembly-hall and six class-rooms for Grades VII. and VIII., art-room, and manual-train- ing room in base- ment; all well ven- tilated and heated	Sufficient and mod- ern lavatory ac- commodation.
V.D.H., 1					Measles; varicella	Overcrowded	Good.
No. vaccinated, 43							
No. vaccinated, 896; cardiac affec- tions, 11					Diphtheria, 1; diphtheria car- rier, 1; mumps, 2; chicken- pox, 3		
No. vaccinated, 510; cardiac affec- tions, 15; pulmonary, 1					Scarlet fever, 1; mumps, 82; whooping-cough, 1		
No. vaccinated, 480; cardiac affec- tions, 4					Scarlet fever, 2; diphtheria, 2; diphtheria carrier, 1; mumps, 1		

SCHOOLS.

Chronic mastoid, 1; congenital dislo- cation of hips, 1; harelip and cleft palate, 1; stuttering, 2; asthma, 2; hay-fever, 1; blepharitis, 12; cho- rea, 2; endocarditis, 1	6	19		2	Meningitis, 1; scarlet fever, 1; chicken-pox, 62; pneumonia, 2; appendectomy, 2	Condition of build- ings good; well kept, heated, and ventilated	Good. Clean; adequate.
					There has been chicken-pox and mumps early in the year. At present there are some cases of whooping-cough. This is very likely to become worse	The very best.....	Imperfect condi- tion.
Partial paralysis, 1		2	2		Epidemic mumps	Fair ventilation; not crowded	O.K.
Cleft palate, 1; cardiac, 1; mentality, 1; curvature of spine, 1						Good.....	Clean.
Artificial eye, 1						Good.....	Clean.
Nervous, 3; pulmonary, 2; cardiac, 3; orthopædic, 3; anæmia, 23; nasal catarrh, 21; skin-disease, 18; wax in ears, 65		2	3		Whooping-cough	Good..... O.K.....	Clean. Clean; adequate.

GRADED CITY

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Gotrc.
Duncan.....	H. P. Swan.....	Miss B. Mitchell..	431	396	18	1	11	3	17	5	35	257		1
Enderby.....	H. W. Keith.....		112	107		1	20	1	5	5	21	22		9
Fernie: Central.....	D. Corsan.....	Winnifred Seymour	546	546	30	2	20	3	10	12	35	250	12	31
Annex.....	D. Corsan.....	Winnifred Seymour	80	80	2	2	1	1	3	3	4	30	2	2
West.....	D. Corsan.....	Winnifred Seymour	60	60	2	1			1	2	6	20	3	4
Grand Forks.....	W. Truax.....		286	280	4	3	10	2	20	8	30	55	20	2
Kamloops: Lloyd George.....	M. G. Archibald and Kingsley Terry	Miss O. M. Garrood	291	280	68	4	47	2	8	17	92	77	73	30
Stuart Wood.....	M. G. Archibald and Kingsley Terry	Miss O. M. Garrood	296	284	75	2	17		1	33	85	75	80	7
Kaslo.....	D. J. Barclay.....		101	92	2	3	6		9	9	27	31	7	55
Kelowna.....	W. J. Knox.....	Miss E. Tisdale....	770	770	20		49	6	39	36	41	48	72	68
Ladysmith: Central.....	H. B. Maxwell.....	Miss H. Peters.....	274	271	18	5	25	3	11	11	101	105		10
Merritt.....	G. H. Tntill.....		307	295	1	1	9	2	4	4	69	105	60	6
Nanaimo: Middle Ward.....	W. F. Drysdale.....	Miss N. Armstrong	167	167	11		14	3	28	27	25	53	18	
North ward.....	W. F. Drysdale.....	Miss N. Armstrong	156	156	8	2	10	1	17	18	25	38	20	9
Quennell.....	W. F. Drysdale.....	Miss N. Armstrong	566	559	98	1	44	6	26	24	41	232	56	67
South Ward.....	W. F. Drysdale.....	Miss N. Armstrong	121	121	7	1	5	1	30	22	14	34	31	4
Nelson: Central.....	E. C. Arthur.....		577	522	2	3	42	3	6	5	86	323	6	137
Hume.....	E. C. Arthur.....		187	171			15				20	82	2	30
New Westminster: F. W. Howay.....	D. A. Clark.....	Miss A. Stark.....	408	408	63		10	1	5	81	87		93	31
Lord Lester.....	D. A. Clark.....	Miss A. Stark.....	347	347	42		12	2	1	50	64			68
Lord Kelvin.....	D. A. Clark.....	Miss A. Stark.....	433	433	58		6	1	4	83	95		87	20
Richard McBride.....	D. A. Clark.....	Miss A. Stark.....	538	538	69		17	1	5	87	100		102	40
Queensboro.....	D. A. Clark.....	Miss A. Stark.....	146	146	17		4		1	28	35		31	6
John Robson.....	D. A. Clark.....	Miss A. Stark.....	398	398	45		19	1	4	51	68		52	44
Herbert Spencer.....	D. A. Clark.....	Miss A. Stark.....	457	457	66	3	9	1	2	82	96		95	30
Port Alberni.....	A. R. Wilson.....	Miss M. E. Grierson	398	382	9		16	4	123	161	235	132	206	6
Port Coquitlam: Central.....	W. Sager.....		160	156	8		5			13	53	25	4	3
James Park.....	W. Sager.....		99	85	4		2			7	30	12		4
Port Moody.....	C. R. Symmes.....		218	218	3	3	5	2	3	8	35	30	4	16
Prince George: King George V.....	C. Ewert.....	Mrs. G. Bond.....	291	284	8	1	16	7	13	13	51	140	1	22
Baron Byng.....	C. Ewert.....	Mrs. G. Bond.....	92	87	2	1	8	2	4	4	13	31	1	6
Connaught.....	C. Ewert.....	Mrs. G. Bond.....	69	64	4	1	3	4	4	4	11	41		
Prince Rupert: Booth Memorial.....	J. H. Carson.....	Miss M. Osborne..	464	450	108	8	18	69	39	4	220	191	165	12

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Fatigue posture, 115; asthma, 1; cardiac, 3; pronated feet, 7		4	14	2	Measles, 212; scarlet fever, 2; rheumatic fever, 1	Good.....	Good.
Cardiac, 3; impediment in speech, 2..	4	3	3		Mumps, 32; chicken-pox, 1; rubella, 80; scarlet fever, 2	O.K.....	O.K.
Chorea, 2; cardiac, 1; impediment in speech, 1	1	1	1		Mumps, 32; chicken-pox, 22, rubella, 34; diphtheria, 4; scarlet fever, 2; poliomyelitis, 2	O.K.....	O.K.
Anæmia, 1; cardiac, 1; chorea, 1		1	1		Mumps, 20; chicken-pox, 26; rubella, 26; diphtheria, 3; scarlet fever, 3; poliomyelitis, 2	O.K.....	O.K.
Cardiac trouble, 2			3	2	Smallpox	Fair.....	Clean; adequate.
Cardiac, 4; D'espine's, 6; bronchial, 3		2	1		Diphtheria, 1; 40 per cent. of children immunized against diphtheria; clinic held in schools	This building is of brick, a comparatively new school, but poorly ventilated and heated	Adequate number of closets which are kept clean and sanitary.
Cardiac, 2; D'espine's, 8; bronchial, 3	3	4			Chicken-pox; a few cases of measles	This school is housed in brick building; fairly well ventilated and heated	Adequate number of closets which are kept clean and sanitary.
Part of bone from head, 1; partial paralysis, 1							
Nervous, 24; pulmonary (not incl. T.B.), 3; curvature of spine, 9; flat feet, 11		7	33	3	Mumps, 3; typhoid, 1; pinkeye, 23; scarlet fever (light), 11; measles, 6	Excellent and modern in every way; no crowding now since the Junior High has come into use	Adequate, modern, sanitary, and kept clean and neat.
Defective chests, 11; cardiac, 6		1			Poliomyelitis, 1	Efficient.....	Yes.
Cardiac, 1		1	2	1	Whooping-cough (held in control by keeping affected from school)	Satisfactory.....	Yes.
Conjunctivitis, 1; blepharitis, 4; catarrah, 1	4	9	5		Whooping-cough, 3; chicken-pox, 5	Good.....	Clean; adequate.
Pulmonary, 1; blepharitis, 1	4	6	2		German measles, 1; chicken-pox, 16	Fair.....	
Asthma, 1; nervous, 2; blepharitis, 8; conjunctivitis; cardiac, 1; hip-disease, 1; fractures, 2	6	18	2	3	Scarlet fever, 3; chicken-pox, 9	Good.....	Clean; adequate.
Blepharitis, 4	4	5	5		Chicken-pox, 6	Good.....	Clean; adequate.
Valvular disease of heart, 2; nervous, 4		2			Measles; varicella	Heating good; ventilation poor	Good.
Valvular disease of the heart, 1	4				Varicella; measles	All rooms overcrowded	Good condition.
Orthopædic defect, 8; heart-defects, 5; nervous, 2; pulmonary, 1	3	15	14		Diphtheria, 3; scarlet fever, 5; smallpox, 1; pertussis, 44; measles, 1; mumps, 8; chicken-pox, 66		
Orthopædic defects, 5; anæmic, 5; pulmonary, 3							
Orthopædic defect, 5; heart-defects, 4; anæmic, 3; nervous, 2; pulmonary, 1	2	16	8	2			
Orthopædic defects, 4; heart-defects, 2; anæmic, 1; pulmonary, 1	12	7	7				
Orthopædic defects, 5; heart-defects, 2; anæmic, 3			9				
Orthopædic defects, 6; heart-defects, 4; nervous, 1							
Orthopædic defects, 8; heart-defects, 6; anæmic, 1; nervous, 3; pulmonary, 1	1	8	9	1			
		5	12	2	Mumps, 2; cardiac, 1; whooping-cough, 2; chicken-pox, 54	Heating by stoves not adequate; well ventilated	Clean; adequate.
Cardiac, 6					Measles; chicken-pox	Satisfactory.....	Clean; adequate.
Cardiac, 5					Measles; chicken-pox; diphtheria	Satisfactory.....	Clean; adequate.
Whooping-cough, 24; chicken-pox, 21; measles, 4	4	3	4	5		Excellent.....	Excellent.
Cardiac, 1; blepharitis, 11; eczema, 5			1		Mumps; whooping-cough; scarlet fever	Good.....	Clean; adequate.
Conjunctivitis, 1; blepharitis, 5							
Blepharitis, 5							
Heart, 15; angemia, 1; asthma, 2; rhonci, 2; skin, 12; orthopædic, 1		1			Measles	Good.....	Good.

GRADED CITY

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Prince Rupert—Con. Borden Street.....	J. H. Carson.....	Miss M. Osborne..	314	308	84	2	19	44	43		156	155	123	5
Seal Cove.....	J. H. Carson.....	Miss M. Osborne..	64	63	14			11	12		43	35	41	3
Westview.....	J. H. Carson.....	Miss M. Osborne..	21	19	7		2	2	7		11	5	12	
Revelstoke: Central.....	J. H. Hamilton.....		146	146			16				4	1		4
Selkirk.....	J. H. Hamilton.....		295	295			6	1	3	3	9	12	1	1
Rossland: MacLean.....	E. E. Topliff.....		437	432	5	3	60	3	12	25	71	70	12	25
Salmon Arm.....	E. S. and A. Beech..		180	180	3	1	30	4	17	14	39	44	11	14
Slocan City.....	A. Francis.....		49	47		1	1	1			9	2	46	15
Trail-Tadanac: Central.....	F. S. Eaton.....		983	983	60	1	48	12	18	18	17	26	12	140
East Trail.....	F. S. Eaton.....		338	338	6		18	3	2	2	6	32	4	21
Tadanac.....	F. S. Eaton.....		69	69	4		8	3	2	2	4	14	1	3
Vancouver: Aberdeen.....	H. White.....	Miss M. Campbell..	465	576	80		16	1		3	44	205	16	22
Alexandra.....	G. Lamont.....	Miss Aske.....	572	564	139		54	1	3	29	79	28	1	35
Bayview.....	W. Dykes.....	Miss F. Innes.....	393	373	88		14	2		1	26	38	3	5
Beaconsfield.....	G. Lamont.....	Miss I. Smith.....	293	320	69		6		2		3	56	1	
Block 70.....	H. White.....	Mrs. Schultz.....	124	105	20		5	1	1	5	23	9	5	6
Brock.....	G. Lamont.....	Miss E. Bell.....	428	445	35		5			24	32	104		22
Carleton.....	G. Lamont.....	Miss E. Edwards..	933	932	193		33	11	36	30	46	262	2	12
Edith Cavell.....	W. Dykes.....	Miss L. Drysdale..	299	244	54		5	1			27	37	6	11
Central.....	H. White.....	Miss V. B. Stevens	494	457	79		24	2	2	7	54	41	19	29
Dawson.....	H. White.....	Miss H. Jukes.....	687	658	138		45	3	6		84	188	7	55
Charles Dickens.....	G. Lamont.....	Miss J. Aske.....	692	547	132		44	3	4	27	87	36	15	24
Douglas.....	G. Lamont.....	Miss Olmstead.....	233	196	13		2		3	9	21	50	1	5
Fleming.....	G. Lamont.....	Miss D. Olmstead..	493	420	56		16		3	29	40	126		11
Franklin.....	H. White.....	Mrs. Schultz.....	453	349	85		8	3	5	5	48	69	12	11
Simon Fraser.....	G. Lamont.....	Miss L. Drysdale..	564	636	107		35		5	10	57	94	2	25
General Gordon.....	H. White.....	Mrs. Schultz.....	940	775	159		33	5	2	1	39	95	2	29
Grandview.....	H. White.....	Miss O. E. Kilpat- rick	456	493	57		18			7	55	21	4	29
Hastings.....	H. White.....	Miss F. Innes.....	876	884	149		35	4		12	84	168	3	24
Henry Hudson.....	W. Dykes.....	Miss F. Innes.....	527	491	90		19	4		2	40	69	1	5
Kerrisdale.....	W. Dykes.....	Miss G. Jeeves.....	632	655	106		14	4	1	1	37	115	5	10
Lord Kitchener.....	W. Dykes.....	Miss G. Jeeves.....	571	594	98		12	3		1	22	159	4	7
Kitsilano.....	W. Dykes.....	Miss F. Innes.....	348	275	58		9		2		22	12	2	3

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Heart, 24; pulmonary, 5; orthopædic, 3; skin, 14			1		Measles	Good	Good.
Cardiac, 1; skin, 3; pulmonary, 1					Measles	Good	Good.
Heart, 1; bronchial, 1					Measles	Good	Good.
Orthopædic, 1					Measles; mumps; whooping-cough	Good	Good.
Nervous, 4; cardiac, 15; pulmonary, 5; paralysis, 3					Scarlet fever, 60; measles, 30; mumps, 2	Good	O.K.
Orthopædic, 2; cardiac, 2						Good	Good.
Cardiac, 2; rickets, 1						Fair	Fair.
Cardiac, 7; nervous, 8; pulmonary, 3	32	24	17	12		Adequate	Yes.
Cardiac, 4; nervous, 3; pulmonary, 4	16	22	14	8		Satisfactory	Yes.
Cardiac, 1						Adequate	Yes.
No. vaccinated, 261; cardiac affec- tions, 1					Diphtheria, 1; whooping-cough, 1; chicken-pox, 5		
No. vaccinated, 229; cardiac affec- tions, 7; pulmonary, 1					Scarlet fever, 1; measles, 10; whooping-cough, 12; chicken- pox, 16		
No. vaccinated, 155; cardiac affec- tions, 2					Scarlet fever, 1; diphtheria, 7; mumps, 8; diphtheria car- riers, 5; whooping-cough, 17; chicken-pox, 1		
No. vaccinated, 129					Scarlet fever, 1; rubella, 1; mumps, 3; whooping-cough, 13; chicken-pox, 2		
No. vaccinated, 42; pulmonary, 2					Mumps, 2; whooping-cough, 7; chicken-pox, 8		
No. vaccinated, 177; cardiac affec- tions, 5; pulmonary, 1					Diphtheria, 3; diphtheria car- riers, 1; whooping-cough, 8; chicken-pox, 4		
No. vaccinated, 361; cardiac affec- tions, 6					Diphtheria, 3; diphtheria car- riers, 1; whooping-cough, 23; chicken-pox, 2		
No. vaccinated, 99; pulmonary, 1					Diphtheria, 1; diphtheria car- riers, 19; mumps, 54; whoop- ing-cough, 17; chicken-pox, 7		
No. vaccinated, 291; cardiac affec- tions, 3					Diphtheria, 1; diphtheria car- rier, 1; mumps, 1; whoop- ing-cough, 9; chicken-pox, 1		
No. vaccinated, 336; cardiac affec- tions, 1					Scarlet fever, 6; diphtheria, 16; mumps, 1; diphtheria car- riers, 16; whooping-cough, 21; chicken-pox, 8; smallpox, 1		
No. vaccinated, 205; cardiac affec- tions, 4					Scarlet fever, 8; measles, 1; mumps, 4; whooping-cough, 30; chicken-pox, 24		
No. vaccinated, 62; cardiac affec- tions, 1					Scarlet fever, 2; diphtheria, 5; diphtheria carriers, 3; whoop- ing-cough, 9; chicken-pox, 30		
No. vaccinated, 170					Whooping-cough, 1; chicken-pox, 21; smallpox, 2		
No. vaccinated, 150					Scarlet fever, 2; diphtheria, 4; whooping-cough, 28; chicken- pox, 4; smallpox, 23		
No. vaccinated, 314; cardiac affec- tions, 5; pulmonary, 1					Scarlet fever, 1; diphtheria, 5; diphtheria carriers, 7; mumps, 22; chicken-pox, 3; whoop- ing-cough, 7		
No. vaccinated, 259; pulmonary, 1					Scarlet fever, 4; whooping- cough, 23		
No. vaccinated, 215; pulmonary, 2					Scarlet fever, 1; whooping-cough, 3; chicken-pox, 9		
No. vaccinated, 353; cardiac affec- tions, 1; pulmonary, 10					Scarlet fever, 4; diphtheria, 12; mumps, 1; diphtheria car- riers, 23; whooping-cough, 14; chicken-ox, 18		
No. vaccinated, 275; cardiac affec- tions, 2; pulmonary, 2					Diphtheria, 2; whooping-cough, 1; chicken-pox, 1		
No. vaccinated, 346; cardiac affec- tions, 1; pulmonary, 1					Scarlet fever, 1; diphtheria, 3; measles, 32; diphtheria car- riers, 9; mumps, 67; whoop- ing-cough, 4		
No. vaccinated, 237; cardiac affec- tions, 2; pulmonary, 1					Scarlet fever, 2; mumps, 17; whooping-cough, 39; chicken- pox, 3		
No. vaccinated, 134; cardiac affec- tions, 1					Diphtheria, 2; chicken-pox, 2; smallpox, 1		

GRADED CITY

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Vancouver—Continued. Langara.....	W. Dykes.....	Miss G. Jeeves.....	449	459	68		19				22	83	3	15
Livingstone.....	G. Lamont.....	Miss D. Shields....	461	488	66		9		3	11	36	70		9
David Lloyd George..	W. Dykes.....	Miss M. Ewart.....	578	406	96		14	4	4	7	49	65	8	6
Magee.....	W. Dykes.....	Miss M. Ewart.....	659	493	97		21	1			26	49	7	8
Moberly and Annex..	G. A. Lamont.....	Miss B. Jenkins....	588	572	97		7		7	29	41	91	8	10
Model.....	G. A. Lamont.....	Miss L. Drysdale..	521	455	111		14		1	4	28	80		16
Mt. Pleasant.....	G. A. Lamont.....	Miss D. Shields....	596	586	107		4	1	2	5	26	95		19
McBride.....	G. A. Lamont.....	Miss B. Jenkins....	690	759	176		15	4	4	19	61	125	5	18
Macdonald.....	H. White.....	Mrs. Schultz.....	558	501	88		20			8	74	34	16	15
Mackenzie.....	G. A. Lamont.....	Miss B. Jenkins....	710	621	165		6		1	15	36	109	11	11
Nelson.....	H. White.....	Miss I. Smith.....	868	942	209		48	6	1	2	58	202	9	20
Florence Nightingale.	G. A. Lamont.....	Miss D. Shields....	612	598	121		4		3	10	21	20	1	20
Norquay and Annex..	G. A. Lamont.....	Miss D. Olmstead..	654	437	91		6	2	3	29	40	106		10
Oak Street.....	W. Dykes.....	Miss L. Drysdale..	166	146	36		5				13	16	2	7
Open Air.....	H. White.....	Miss D. Shields....	71	84							6	1		15
Prince of Wales.....	W. Dykes.....	Miss L. Drysdale..	280	255	29		8	1		1	16	22	2	2
Queen Mary.....	W. Dykes.....	Miss G. Jeeves.....	471	494	98		18	5		3	59	64	4	3
Quilchena.....	W. Dykes.....	Miss M. Ewart.....	287	252	55		13				17	16	2	3
Renfrew.....	G. A. Lamont.....	Miss I. Smith.....	335	354	77		9		2		3	59	3	4
Cecil Rhodes.....	H. White.....	Miss M. MacNaughton	586	499	52		18	7	2	2	36	66	23	17
Lord Roberts.....	H. White.....	Miss H. Jukes.....	850	815	142		41	5	4		101	173	15	20
Laura Secord.....	H. White.....	Miss O. Kilpatrick.	647	748	123		38	2	3	1	37	64		26
Lord Selkirk.....	G. A. Lamont.....	Miss J. Aske.....	866	805	150		56	7	11	63	120	54	6	36
Sexsmith.....	G. A. Lamont.....	Miss E. Bell.....	379	376	58		2	2	1	30	60	93		19
Seymour.....	H. White.....	Miss O. Kilpatrick.	740	766	83		43	2	2	10	29	187	8	23
Strathcona.....	H. White.....	Miss M. McLellan..	1270	1257	159		64	4	2	3	86	253	16	45
Tecumseh.....	G. A. Lamont.....	Miss D. Olmstead..	761	631	119		12	4		34	43	146	1	30
Tennyson.....	H. White.....	Miss M. MacNaughton	809	710	69		18	6	1	16	72	123	44	29

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
No. vaccinated, 192; cardiac affec- tions, 1; pulmonary, 1					Scarlet fever, 1; mumps, 5; whooping-cough, 43; chicken- pox, 1		
No. vaccinated, 380; cardiac affec- tions, 2					Scarlet fever, 1; diphtheria, 1; mumps, 5; whooping-cough, 4; chicken-pox, 8		
No. vaccinated, 160; cardiac affec- tions, 4; pulmonary, 7					Diphtheria, 2; diphtheria car- rier, 1; mumps, 41; whoop- ing-cough, 30; chicken-pox, 6		
No. vaccinated, 239; cardiac affec- tions, 2					Scarlet fever, 1; mumps, 11; whooping-cough, 2; chicken- pox, 10		
No. vaccinated, 219; cardiac affec- tions, 1; pulmonary, 1					Whooping-cough, 3		
No. vaccinated, 151					Scarlet fever, 1; diphtheria, 2; whooping-cough, 4; chicken- pox, 12		
No. vaccinated, 253					Scarlet fever, 3; whooping-cough, 4; chicken-pox, 6		
No. vaccinated, 264; cardiac affec- tions, 4; pulmonary, 2					Scarlet fever, 2; diphtheria, 4; diphtheria carrier, 1; whoop- ing-cough, 6; chicken-pox, 3		
No. vaccinated, 245; cardiac affec- tions, 1; pulmonary, 2					Scarlet fever, 4; whooping-cough, 6; chicken-pox, 1; smallpox, 1		
No. vaccinated, 270; cardiac affec- tions, 2; pulmonary, 2					Scarlet fever, 2; diphtheria, 22; whooping cough, 4; diphtheria carriers, 23		
No. vaccinated, 332; cardiac affec- tions, 1; pulmonary, 3					Scarlet fever, 6; diphtheria, 3; mumps, 4; diphtheria car- riers, 2; whooping-cough, 23; chicken-pox, 17		
No. vaccinated, 242					Scarlet fever, 2; diphtheria, 1; measles, 1; diphtheria car- riers, 5; whooping-cough, 24; chicken-pox, 20		
No. vaccinated, 169					Scarlet fever, 5; measles, 1; mumps, 1; whooping-cough, 14; chicken-pox, 3		
No. vaccinated, 69; cardiac affec- tions, 1					Scarlet fever, 3; mumps, 3; whooping-cough, 6		
No. vaccinated, 29					Mumps, 1; chicken-pox, 2		
No. vaccinated, 172					Diphtheria, 1; mumps, 17; whooping-cough, 1; chicken- pox, 3		
No. vaccinated, 235; cardiac affec- tions, 7					Diphtheria, 3; diphtheria car- riers, 6; mumps, 4; whoop- ing-cough, 28; chicken-pox, 73		
No. vaccinated, 118; cardiac affec- tions, 3					Scarlet fever, 2; diphtheria, 2; mumps, 1; diphtheria car- riers, 2; whooping-cough, 4; chicken-pox, 2		
No. vaccinated, 152					Diphtheria, 2; diphtheria car- riers, 4; whooping-cough, 1; chicken-pox, 3		
No. vaccinated, 274					Scarlet fever, 1; mumps, 15; whooping-cough, 5; chicken- pox, 1		
No. vaccinated, 423; cardiac affec- tions, 1; pulmonary, 1					Diphtheria, 1		
No. vaccinated, 300; cardiac affec- tions, 1; pulmonary, 1					Diphtheria, 5; diphtheria car- riers, 6; whooping-cough, 1; chicken-pox, 12		
No. vaccinated, 218; cardiac affec- tions, 2; pulmonary, 2					Scarlet fever, 2; diphtheria, 5; diphtheria carrier, 1; mumps, 1; chicken-pox, 11; whoop- ing-cough, 13		
No. vaccinated, 193					Mumps, 6; whooping-cough, 18; chicken-pox, 7		
No. vaccinated, 500; cardiac affec- tions, 3					Diphtheria, 4; diphtheria car- riers, 3; rubella, 2; chicken- pox, 19		
No. vaccinated, 1,155; cardiac affec- tions, 3					Diphtheria, 5; diphtheria car- rier, 1; whooping-cough, 10; chicken-pox, 7		
No. vaccinated, 236; cardiac affec- tions, 8; pulmonary, 1					Scarlet fever, 2; diphtheria, 6; mumps, 3; diphtheria car- riers, 8; whooping-cough, 3; chicken-pox, 32; smallpox, 2		
No. vaccinated, 354; cardiac affec- tions, 1; pulmonary, 1					Scarlet fever, 2; mumps, 2; whooping-cough, 1; chicken- pox, 27; smallpox, 1		

GRADED CITY

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Vancouver—Continued.														
Van Horne.....	G. A. Lamont.....	Miss E. Bell.....	412	415	52		6	2	2	10	37	69		13
Wolfe.....	G. A. Lamont.....	Miss E. Bell.....	535	526	87		10	3	1	20	48	148	1	28
Vancouver, North:														
Lonsdale.....	H. Dyer.....	Miss E. Lowther....	386	355	22	1	25	3			60	12	12	
Queen Mary.....	H. Dyer.....	Miss E. Lowther....	476	479	21		34	4			59	9	20	1
Ridgeway.....	H. Dyer.....	Miss E. Lowther....	529	554	16		28	3			50	6	11	2
Vernon:														
Consolidated Schools.	O. Morris.....	Mrs. S. Martin.....	828	820	4	5	10	4	6	9	16	23		3
Victoria:														
Bank Street.....	D. Donald.....	Miss E. J. Herbert.	141	141			1	1	1	4	8			
Beacon Hill.....	D. Donald.....	Miss I. E. Adams..	144	144						5	8			
Boys' Central.....	D. Donald.....	Miss E. J. Herbert.	306	306			6	2	2	5	15			
Burnside.....	D. Donald.....	Miss C. Mowbray...	246	246			7			6	10			
Sir James Douglas.....	D. Donald.....	Miss E. J. Herbert.	508	508			15	1		8	21		2	2
George Jay.....	D. Donald.....	Miss I. E. Adams..	144	144			12	1		4	7			
Girls' Central.....	D. Donald.....	Miss E. J. Herbert.	373	373			5		1	2	8			
Margaret Jenkins.....	D. Donald.....	Miss E. J. Herbert.	381	381			8			4	12			
King's Road.....	D. Donald.....	Miss C. Mowbray...	23	23			1			1	2			
Kingston Street.....	D. Donald.....	Miss I. E. Adams	151	151			3			2	3			
North Ward.....	D. Donald.....	Miss C. Mowbray...	246	246			7			6	10			
Oaklands.....	D. Donald.....	Miss C. Mowbray...	540	540			19	1	1	10	14			
Quadra Street.....	D. Donald.....	Miss C. Mowbray...	263	263			3		1	7	11			
Quadra Primary.....	D. Donald.....	Miss C. Mowbray...	132	132										
Railway Street.....	D. Donald.....	Miss C. Mowbray...	48	48			1				1			
South Park.....	D. Donald.....	Miss I. E. Adams.	334	334			13		1	6	10			
Spring Ridge.....	D. Donald.....	Miss I. E. Adams.	160	160			7			9	13		1	
Victoria West.....	D. Donald.....	Miss I. E. Adams	320	320			9			17	20			

RURAL MUNICIPAL

Burnaby:														
Armstrong Avenue.....	J. G. McCammon.....		54	54		1			1	1	5	33	10	4
Barnet.....	J. G. McCammon.....		29	29							1	13	5	
Capitol Hill.....	J. G. McCammon.....		257	244	1		4	1	5	8	37	150	44	5
Douglas Road.....	J. G. McCammon.....		198	194		2	5	3	4	9	25	116	30	3
Edmonds Street.....	J. G. McCammon.....		550	539	1	1	16	4	16	21	71	319	67	13
Gilmore Avenue.....	J. G. McCammon.....		742	721		1	27	4	23	26	102	414	103	10
Hamilton Road.....	J. G. McCammon.....		20	20							1	9	2	1
Inman Avenue.....	J. G. McCammon.....		187	178		1	4	1	5	3	22	104	28	3
Kingsway, West.....	J. G. McCammon.....		628	617	1	1	23	1	10	16	71	353	102	13
Kitchener Street.....	J. G. McCammon.....		315	313			12		13	14	43	185	49	7
Nelson Avenue.....	J. G. McCammon.....		416	409	1	2	7		20	21	67	257	73	7
Riverway, East.....	J. G. McCammon.....		69	68		1	4				6	37	10	2
Riverway, West.....	J. G. McCammon.....		38	38					1	2	6	19	5	
Schou Street.....	J. G. McCammon.....		96	95			7	1	2		13	51	13	1
Seaforth.....	J. G. McCammon.....		21	21					2	2	4	10	2	
Second Street.....	J. G. McCammon.....		134	134		1	5	3	3	4	14	74	22	4
Sperling Avenue.....	J. G. McCammon.....		47	45			4		1	1	4	20	4	1
Stride Avenue.....	J. G. McCammon.....		69	67					1	1	9	37	12	
Windsor Street.....	J. G. McCammon.....		263	263			6		3	10	31	152	48	8
Chilliwack:														
Atchelitz.....	J. D. Moore.....	Miss W. Green.....	101	101	3	3	5	3	8	23	25	16	4	8
Camp Slough.....	J. D. Moore.....	Miss W. Green.....	19	19	2	4	1	1			1	2		2

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
No. vaccinated, 184; cardiac affec- tions, 2					Whooping-cough, 9; chicken- pox, 11		
No. vaccinated, 180; cardiac affec- tions, 2; pulmonary, 1					Scarlet fever, 1; diphtheria, 1; diphtheria carrier, 1; mumps, 16; whooping-cough, 11		
Cardiac, 8; nervous, 3; respiratory, 3					Mumps, 9; whooping-cough, 5		
Cardiac, 8; nervous, 1; respiratory, 4; orthopædic, 2		4		2	Measles, 1; mumps, 10; chicken- pox; whooping-cough, 1		
Cardiac, 11; nervous, 2; respiratory, 6; orthopædic, 3	1	5		3	Measles, 2; mumps, 20; chicken- pox, 1; whooping-cough, 6		
Cleft palate, 1; asthma, 3; stammer- ing, 1; cardiac, 5	11	20	15	1	Chicken-pox, 40; pneumonia, 2; whooping-cough, 6; rubella, 1	Good.....	Clean; adequate.
Nervous, 1; impeded speech, 1; de- formed arm, 1 (accident)		1	7	1	Chicken-pox, 9; mumps, 4.....	Good.....	Clean; adequate.
		1	3		Chicken-pox, 3; mumps, 6; diph- theria, 1	Good.....	Clean; adequate.
Nervous, 1; cardiac, 2; pulmonary, 2; defective speech, 1; deformed arm, 1 (accident); deformed leg, 1 (ac- cident)		14	12	4	Chicken-pox, 4; mumps, 3; scar- let fever, 1	Old building; clean..	Clean; adequate.
Nervous, 1; cardiac, 3; spine, 1; or- thopædic, 1		6	6		Chicken-pox, 39; mumps, 25; scarlet fever, 1	Good.....	Clean; adequate.
Cardiac, 1		16	5	6	Chicken-pox, 9; mumps, 5; whooping-cough, 7	Good.....	Clean; adequate.
Cardiac, 2; deformity of chest, 1.....		6	4	4	Chicken-pox, 1; mumps, 9; scarlet fever, 2	Good.....	Clean; adequate.
		21	5	1	Mumps, 6; whooping-cough, 3; scarlet fever, 2	Good.....	Clean; adequate.
Orthopædic (left leg), 1; torticollis, 1		5	7	1	Chicken-pox, 18; mumps, 8; whooping-cough, 2	Good.....	Clean; adequate.
						Old building; not in good condition	Clean.
Cleft palate, 1.....		1	2	1	Whooping-cough, 6; chicken- pox, 4	Old building, but clean	Clean.
Nervous, 1; cardiac, 3; spine, 1; or- thopædic, 1		6	6		Chicken-pox, 39; mumps, 25; scarlet-fever, 1	Good.....	Clean; adequate.
Nervous, 2; cardiac, 3; pulmonary, 1; orthopædic, 2		1	2		Chicken-pox, 1; mumps, 5; whooping-cough, 1	Good.....	Clean; adequate.
Nervous, 1; cardiac, 2; orthopædic, 4	2	2	2		Whooping-cough, 7; scarlet fever, 2	Good.....	Clean; adequate.
		2	5		Chicken-pox, 22; mumps, 6....	Good.....	Clean; adequate.
Nervous, 1; cardiac, 4.....		6	3		Mumps, 2; scarlet fever, 1.....	In good condition... Old building, but clean	Clean; adequate.
Pulmonary, 1		2	5		Mumps, 7; whooping-cough, 1; diphtheria, 1; measles, 18	Old building, but clean	Clean.
Orthopædic, 1; cleft palate, 1.....	1	7	8	1	Chicken-pox, 12; mumps, 10....	Good.....	Clean; adequate.

SCHOOLS.

Corrected vision, 1.....						Good.....	Yes.
Orthopædic, 1; corrected vision, 7.....	2	2				Good.....	Yes.
Heart, 1; corrected vision, 5.....	3		1			Good.....	Yes.
Heart, 1; orthopædic, 3; corrected vision, 16		2				Good.....	Yes.
Heart, 1; orthopædic, 5; corrected vision, 22	13	1		1		Good.....	Yes.
Orthopædic, 1; corrected vision, 4.....						Good.....	Yes.
Orthopædic, 2; corrected vision, 5.....						Good.....	Yes.
Heart, 2; corrected vision, 27.....		1				Good.....	Yes.
Orthopædic, 2; corrected vision, 8.....	3	1				Good.....	Yes.
Orthopædic, 2; corrected vision, 13.....			1			Good.....	Yes.
Corrected vision, 4.....						Good.....	Yes.
Corrected vision, 2.....						Good.....	Yes.
Corrected vision, 8.....	1					Good.....	Yes.
						Good.....	Yes.
Corrected vision, 3.....	2					Good.....	Yes.
						Good.....	Yes.
	1					Good.....	Yes.
Heart, 1; corrected vision, 10.....	3	2				Good.....	Yes.
Tonsils removed, 4; corrected vision, 3		3			Whooping-cough, 1	Good.....	Good.
Tonsils and adenoids, 1.....					Chicken-pox, 2	Good.....	Good.

RURAL MUNICIPAL

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Burnaby—Continued.														
Cheam.....	J. D. Moore.....	Miss W. Green.....	57	57	1	1	3		1	3	3	7	5	1
East Chilliwack.....	J. D. Moore.....	Miss W. Green.....	75	75	7		4	1	4	11	15	13	1	4
Fairfield Island.....	J. D. Moore.....	Miss W. Green.....	22	22	1				2	5	6	9	1	
Lotbiniere.....	J. D. Moore.....	Miss W. Green.....	11	11	1			1	2	4	4	3	2	
Promontory Flats.....	J. D. Moore.....	Miss W. Green.....	22	22	1			1	1	5	5	6		
Robertson.....	J. D. Moore.....	Miss W. Green.....	150	150	4	1	2		13	29	30	28	2	2
Rosedale.....	J. D. Moore.....	Miss W. Green.....	167	167	6	6	8	1	9	22	27	36	3	15
Ryder Lake.....	J. D. Moore.....	Miss W. Green.....	17	17	3		1		5	5	5	6	3	2
Sardis.....	J. D. Moore.....	Miss W. Green.....	206	206	8	2	13	4	3	30	31	43	5	6
Strathcona.....	J. D. Moore.....	Miss W. Green.....	49	49	8	2	3	2	7	13	14	14	1	3
Sumas.....	J. D. Moore.....	Miss W. Green.....	52	52	4	2	7	1	4	6	7	9	1	2
Yarrow No. 1.....	J. D. Moore.....	Miss W. Green.....	15	15					1	1	1	3		
Yarrow No. 2.....	J. D. Moore.....	Miss W. Green.....	71	71	2		11		2	17	22	7	2	8
Coldstream:														
Coldstream.....	S. G. Baldwin.....		84	84			4		1	4	6	5		4
Lavington.....	S. G. Baldwin.....		31	31		1	1		3	4	4	4		2
Coquitlam:														
Central.....	Bruce Cannon.....		67	60			1			4	3	11		9
Glen.....	Bruce Cannon.....		19	19							1	1	2	2
Maillardville.....	Bruce Cannon.....		134	129	3	3				2	13	16	2	21
Mountain View.....	Bruce Cannon.....		51	46			5			3	4	5		6
Silver Valley.....	Bruce Cannon.....		8	7								1		1
Victoria Drive.....	Bruce Cannon.....		13	11							2	1		1
Cowichan, North:														
Chemainus.....	H. B. Rogers.....	Miss A. Yates.....	175	166	20		19		13	13	69	54	16	5
Crofton.....	H. B. Rogers.....	Miss A. Yates.....	27	25	5		2		1	1	7	14	3	1
Westholme.....	H. B. Rogers.....	Miss A. Yates.....	20	18	1		2		1	1	5	2	3	
Delta:														
Annacis Island.....	A. A. King.....		18	15			1		1	1	6	4		1
Annieville.....	A. A. King.....		19	16					2	2	3	4		
Boundary Bay.....	A. A. King.....		31	21					5	5	5	2		2
Canoe Pass.....	A. A. King.....		16	12	3				2	2	5	5	2	2
Delta, Central.....			273	255	6	9	8	1	24	24	43	29	4	6
Delta, East.....	A. A. King.....		28	25					3	3	3	8		
Kennedy.....	A. A. King.....		69	62	2		3		5	5	15	19		1
Sunbury.....	A. A. King.....		54	52	1	3	4		2	2	16	1	5	3
Trenant.....	A. A. King.....		24	23					3	3	3	1		1
Westham Island.....	A. A. King.....		20	18					1	1	3	7		1
Esquimalt:														
Lampson Street.....	G. S. McCallum.....	Miss E. Morrison.....	548	548	2	2	6	2	27	35	59	20	2	3
Kent:														
Agassiz.....	P. McCaffrey.....		174	161	4	3	12	9	85	85	85	17	3	36
Harrison Mills.....	P. McCaffrey.....		25	25	1		2	1	11	11	11	7		3
Langley:														
Aldergrove.....	B. B. Marr.....		43	40			3		3	5	5	5		
Belmont.....	B. B. Marr.....		29	27			1		2		3	5		
County Line.....	B. B. Marr.....		84	73			3		4	4	8	14		2
Langley, East.....	B. B. Marr.....		24	24			1				5	3		2
Langley, Fort.....	B. B. Marr.....		78	71		2	2	1	2	5	8	9		1
Glenwood.....	B. B. Marr.....		28	25			4				1	4		
Glen Valley.....	B. B. Marr.....		24	23							2			2
Langley Prairie.....	B. B. Marr.....		135	129			8		4	12	20	18		
Milner.....	B. B. Marr.....		106	96			7		4	8	13	8		1
Murrayville.....	B. B. Marr.....		127	121			8		2	4	18	16		1
Otter.....	B. B. Marr.....		68	62			2	1	3	3	8	8		
Otter, South.....	B. B. Marr.....		23	20							2	5		
Patricia.....	B. B. Marr.....		28	26			2				3	3		1
Sperling.....	B. B. Marr.....		33	30						3	5	5		

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Tonsils and adenoids, 5; birth injury, 1; corrected vision, 1		1			Whooping-cough, 6; chicken- pox, 23	Good.....	Fair.
Corrected vision, 4; tonsils and ade- noids, 3		3			Whooping-cough, 1	Window-lighting in one room poor	Good.
Corrected vision, 1					Whooping-cough, 1; chicken- pox; mumps, 12	Good.....	Good.
Tonsils and adenoids, 1		1				Good.....	Good.
Orthopædic, 1; tonsils and adenoids removed, 7		1				Good.....	Good.
Bronchitis, 1; orthopædic, 2; tonsils, 1; orthopædic corrected, 1		9		1	Measles, 7; chicken-pox, 9	Good.....	Fair.
Orthopædic, 2; corrected vision, 3; tonsils and adenoids, 9	9	7			Whooping-cough, 1; chicken- pox, 23	Good.....	Good.
Tonsils removed, 3					Chicken-pox, 4	Ventilation poor.....	Good.
Chronic appendix, 1; cardiac, 1; right hip deformity, 1; defective speech, 1; corrected vision, 2; tonsils and adenoids removed, 8	2	6	5	1	Mumps, 1	Good.....	Good.
Bronchitis, 1				1	Chicken-pox, 2; mumps, 12	Window-lighting in one room poor	Fair.
Corrected vision, 1; asthma, 1; chronic nephritis, 1		2	1			Good.....	Good.
Corrected vision, 1; tonsils and ade- noids removed, 1		1		1		Good.....	Poor.
						Good.....	Good, but inade- quate.
					Chicken-pox, 5	Crowded.....	Clean, etc.
						Good.....	Clean, etc.
Paronychia, 1; granular lids, 1; dirty, 4			2				
Granular lids, 1				1		Good.....	Clean, adequate.
Pneumonia, 1; infected eyelids, 2; bronchitis, 1; granular lids, 5; seb- orrhœa, 1; sties, 1; mastitis, 1; acne, 1			1	1	Whooping-cough	Good.....	Clean, adequate.
Cardiac, 1; pigeon-chest, 1					Chicken-pox	Good.....	Clean; adequate.
Bronchitis, 2						Good.....	Clean; adequate.
Cardiac, 6; spine, 1; hernia, 1; flat feet, 1					Scarlet fever, 2; dysentery, 1	Not crowded; good re- pair; heating fair	Clean; adequate.
						Not crowded; poorly heated; draughty	Clean; adequate.
Pulmonary, 1; cardiac, 41			2		Measles, 5	Not crowded; good re- pair; well heated	Clean; adequate.
						Good.....	Clean.
						Good.....	Clean.
					Mumps, 12	Good.....	Clean.
					Chicken-pox, 2	Good.....	Clean.
		7	6	1	Chicken-pox, 78; mumps, 37; whooping-cough, 13; measles, 1; German measles, 1	Good.....	Clean.
					Whooping-cough, 9	Good.....	Clean.
					Chicken-pox, 7	Good.....	Clean.
Orthopædic defects, 3					Mumps, 2; chicken-pox, 10; Whooping-cough, 4	Good.....	Clean.
					Mumps, 6; whooping-cough, 2	Good.....	Clean.
Cardiac, 3; nervous, 2		3	12	2	Whooping-cough, 6; mumps, 38; chicken-pox, 35	General conditions good	Twenty-two; ade- quate; clean.
Asthma, 1; anæmia, 2; cardiac, 1; orthopædic deformity, 1							
					Diphtheria, scarlet fever		Clean.
							Clean.
						Overcrowded	Clean.
							Clean.
							Clean.
							Clean.
						Poorly heated	Clean.
							Clean.
				2			Clean.
				1			Clean.
							Clean.
					Diphtheria	Crowded	Clean.

RURAL MUNICIPAL.

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Langley—Continued.														
Springbrook.....	B. B. Marr.....		21	21						3	3	3		1
West Langley.....	B. B. Marr.....		71	67		1	2			4	6	11		
Maple Ridge:														
Albion.....		Miss H. Fawcett.....	23	23	3	1	1		1		2	10	2	
Alexander Robinson.....		Miss H. Fawcett.....	136	136	11	1	4	1	1		25	55	9	
Hammond.....		Miss H. Fawcett.....	197	192	13	1	9		4		72	77	55	3
Haney.....		Miss H. Fawcett.....	295	295	18	1	15	3	5		48	94	18	2
Maple Ridge.....		Miss H. Fawcett.....	74	74	10		6	1	2		12	11	9	2
Ruskin.....		Miss H. Fawcett.....	22	22	1	1			1		5	6	1	1
Lillooet.....		Miss H. Fawcett.....	21	21	2	1	1	1	1		3	6	4	1
Webster's Corners.....		Miss H. Fawcett.....	85	85	18		2	2	3		19	41	13	2
Whonnock.....		Miss H. Fawcett.....	104	104	4		3	1	2		13	33	4	1
Matsqui:														
Aberdeen.....	A. McBurney.....		54	52	5	2	2		3	8	10	6		1
Bradner.....	A. McBurney.....		72	65	1	1	5	1	1	12	16	8		3
Clayburn.....	A. McBurney.....		61	56	8	2	3			10	23	6		3
Gifford.....	A. McBurney.....		26	25	3	1				6	10	2		
Jubilee.....	A. McBurney.....		19	19	2	1	3		2	6	6	3		
Matsqui.....	A. McBurney.....		137	130	4	3	4	2	5	8	28	12	1	11
Mt. Lehman.....	A. McBurney.....		45	45	3	4	5	2	3	10	15	5		1
Peardonville.....	A. McBurney.....		28	25	1	1	3		1	5	6	9		
Poplar.....	A. McBurney.....		60	56	3	8	4		4	15	20	19	2	5
Ridgedale.....	A. McBurney.....		30	30	1	1	3	1	1	9	9	8		1
Mission:														
Cedar Valley.....	W. H. McIntyre.....	Miss H. Fawcett.....	63	63	12	1	2	1	4		7	27	5	3
Hatzic.....	W. H. McIntyre.....	Miss H. Fawcett.....	56	56	6	2	3	1	5		11	24	4	5
Mission Public.....	W. H. McIntyre.....	Miss H. Fawcett.....	392	392	51	2	19	4	22		79	151	35	30
Silverdale.....	W. H. McIntyre.....	Miss H. Fawcett.....	34	34	3	1	1	1	2		7	11	5	2
Silverhill.....	W. H. McIntyre.....	Miss H. Fawcett.....	27	27	3		1		1		3	9	6	2
Stave Falls.....	W. H. McIntyre.....	Miss H. Fawcett.....	29	29	3		1		5		9	17	5	1
Stave River Gardens.....	W. H. McIntyre.....	Miss H. Fawcett.....	11	11	3				1		4	6	3	1
Steelhead.....	W. H. McIntyre.....	Miss H. Fawcett.....	12	12	2		2		3		7	8	3	
Oak Bay:														
Monterey.....	J. N. Taylor.....	Miss Bradshaw.....	356	353	4	2	16	1	30	12	41	20	2	14
Willows.....	J. N. Taylor.....	Miss Bradshaw.....	264	255	2	1	7	1	14	8	55	18	1	7
Peachland.....	Wm. Buchanan.....	Miss M. Twiddy.....	52	52			6		3	5	18	13		47
Penticton.....	H. McGregor.....		744	744	27	20	51	30		61	179	190	60	38
Pitt Meadows.....	G. Morse.....		156	142	42		16	2			32	56	16	3
Richmond:														
Bridgeport.....	W. K. Hall.....		407	360	10	1	9	1	3	12	31	35	2	3
Lord Byng.....	W. K. Hall.....		475	460	2		12		5	30	40	53	3	5
General Currie.....	W. K. Hall.....		21	20			1			1	6	6		
English.....	W. K. Hall.....		24	23			1			1	2	8		
Mitchell.....	W. K. Hall.....		102	91	1		3	1	1	3	9	6	1	
Sea Island.....	W. K. Hall.....		116	90			5				3			7
Saanich:														
Cedar Hill.....	D. Berman.....	Miss M. Harvey.....	146	146	2	8	2	7	2		22	38	23	7
Cloverdale.....	D. Berman.....	Miss M. Harvey.....	242	242	1	11	21	21			33	69	40	12
Craigflower.....	D. Berman.....	Miss E. Naden.....	107	107	1	3	2	3	2	1	17	22	18	4
Gordon Head.....	D. Berman.....	Miss M. Harvey.....	55	55	2	2	1	1			9	8	1	2
Keating.....	D. Berman.....	Miss M. Harvey.....	68	68	1	8	5	2	1		11	9	5	1
Lake Hill.....	D. Berman.....	Miss M. Harvey.....	67	67		3	3	2	1		14	10	7	5
McKenzie Avenue.....	D. Berman.....	Miss E. Naden.....	131	131	2	13	1	11	1		17	54	22	8
Model School.....	Jas. P. Vye.....	Miss M. Harvey.....	74	74			1	1	3	3	3	8		

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
					Conjunctivitis		Clean.
		2	2			Crowded	Clean.
			1	1	Chicken-pox	Old building; very good	Yes.
Abscessed tooth, 1; pyorrhœa, 1	7		4		Chicken-pox	Good (one room poor- ly lighted)	Fair.
Epilepsy, 1; sore mouth, 2; ortho- pædic, 1		6	5	2	Diphtheria	Very good (one base- ment room)	Fairly good.
Mastoid, 1; pyorrhœa; 2; nervous, 1; Pulmonary, 1	3	1	12	1	Chicken-pox; mumps, 3	Good	Good.
Pneumonia, 1; cleft palate, 1; strabis- mus, 1		2	3		Whooping-cough, 1	Good	Fair to good.
Conjunctivitis, 2; abscessed tooth, 1; nervous, 1			2		Measles, 9	Good	Poor.
	1			1		Good	Good.
Orthopædic, 1; asthma, 1; eczema, 1		2	5		Mumps	Good	Adequate; not al- ways clean.
Rheumatism, 1; nervous, 1; eczema, 1			4		Measles (many cases)	Good	Fair.
Nervous, 1					Impetigo	Good	Yes; good.
						Good	Good.
						Good	Good.
						Good	Good.
Endocarditis, 1						Good	Good.
Nervous, 1; congenital hip, 1			4		Whooping-cough	Good	Good.
						Good	Good.
						Good	Good.
Abscessed tooth, 1; strabismus, 1; car- diac, 1; skin (dry scalp), 3; sties, 1	5		4		Severe tonsillitis, 1	One room dark, crowded; other room O.K.	Good.
Eczema, 1; orthopædic, 1; strabismus, 1; granular eyelids, 2		2	6	3		Good	Good.
Cardiac, 1; orthopædic, 1; asthma, 1; one eye only, 2	2	3	18	1	Mumps	Good, crowded	Good.
	1	2	2	1	Mumps; whooping-cough	Blackboards poor to fair	Fair.
Eczema, 2					Mumps (teacher only)	Good	Good.
Cardiac, 1; iritis, 1						Fair	Poor; improved.
Skin, 3 (of long standing); eczema (?); (psoriasis (?))						Good	Good.
			1			Good	Fair.
Cardiac, 4; orthopædic, 4; pulmonary, 3; anæmia, 4					Chicken-pox; mumps; whooping- cough; measles	Well heated and ven- tilated; no over- crowding	Clean; adequate.
Cardiac, 2; anæmia, 4; orthopædic, 1; diabetes, 1; acne, 2; conjunctivi- tis, 1; cleft palate, 1					Chicken-pox; measles; whoop- ing-cough; mumps	Well heated and ven- tilated; no over- crowding	Clean; adequate.
Pneumonia, 1						Satisfactory	Clean; adequate.
Pulmonary, 2; cardiac, 12; skin, 37; orthopædic, 7					Infectious diseases, 11		
Cardiac, 3			2			Overcrowded	Good.
	5	1	1	5	Mumps, 21; measles, 5; whoop- ing-cough, 25	O.K.	Clean.
			25	3	Measles, 2; whooping-cough, 30	O.K.	Clean.
			1		Measles, 17; whooping-cough, 2	O.K.	Clean.
Cardiac, 1		1	3	2	Whooping-cough, 10	O.K.	Clean.
					Whooping-cough, 2; smallpox, 2; chicken-pox, 5; measles, 17	O.K.	Clean.
						O.K.	Clean.
Cardiac, 4; strabismus, 2		1	5		Mumps, 5; whooping-cough, 6; scarlet fever, 2; measles, 1		
Cardiac, 6; pulmonary, 3; strabis- mus, 2			6		Diphtheria, 2; chicken-pox, 15; whooping-cough, 6; measles, 1		
Cardiac, 1; strabismus, 1		3	4	4	Mumps, 52; chicken-pox, 5; ty- phoid, 2		
Cardiac, 1					Whooping-cough, 1		
Cardiac, 1; strabismus, 1		2			Whooping-cough, 4; scarlet fever, 1		
			4		Mumps, 1; whooping-cough, 1; scarlet fever, 3		
Cardiac, 5; pulmonary, 3; strabismus, 2; lues, 1		2	2	2	Mumps, 33		
Defective speech, 1					Mumps, 1	Good	Excellent.

RURAL MUNICIPAL

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Saanich—Continued.														
Prospect Lake.....	D. Berman.....	Miss E. Naden.....	56	56	1	4		3	1		7	11	8	3
Royal Oak.....	D. Berman.....	Miss M. Harvey.....	87	87		3	1				22	25	15	3
Saanichton.....	D. Berman.....	Miss M. Harvey.....	28	28	3	2	1				4	9	2	2
Saanich, West.....	D. Berman.....	Miss E. Naden.....	50	50	1	3	2	1			6	11	4	
Strawberry Vale.....	D. Berman.....	Miss E. Naden.....	90	90	2	8	2	2			12	19	7	7
Tillicum.....	D. Berman.....	Miss E. Naden.....	297	297	9	7	7	20	2	3	70	73	41	11
Tolmie.....	D. Berman.....	Miss E. Naden.....	255	255	6	13	14	18	3		65	85	48	5
Salmon Arm:														
Broadview.....	Drs. Beech & Beech.....		26	22			1	1	2	4	4	9	4	2
Canoe, North.....			70	63	2		5	1	4	5	22	21	7	3
Canoe, South.....	Drs. Beech & Beech.....		28	27	2			1	3	2	5	11	3	3
Glenden.....	Drs. Beech & Beech.....		30	30			4	2	2	7	12	14	7	5
Larch Hill.....	Drs. Beech & Beech.....		22	20						2	5	6	2	1
Mount Ida.....	Drs. Beech & Beech.....		37	36	3	1	4		3	2	4	11	1	8
Salmon Arm, West.....	Drs. Beech & Beech.....		43	38	2	1	5	1	1	2	6	10	4	7
Sumas:														
Huntingdon.....	J. M. McDiarmid.....		71	69	2	1	2		1	2	4	8	1	5
Kilgard.....	J. M. McDiarmid.....		40	38	3	2	3		4	4	9	6	3	4
Straiton.....	J. M. McDiarmid.....		27	24	1		1		3	3	3	2	2	1
Upper Sumas.....	J. M. McDiarmid.....		133	127	4		5		5	9	15	12	8	14
Summerland.....	F. W. Andrew.....		330	310	29	2	30	6	49	65	80	165	81	90
Surrey:														
Annedale.....	F. D. Sinclair.....		17	15	3						1		2	
Clayton.....	F. D. Sinclair.....		74	71	7		3					2	1	
Cloverdale.....	F. D. Sinclair.....		204	191	5		5				21	3	4	7
Colebrook.....	F. D. Sinclair.....		24	24	3					1	1		1	
Crescent.....	F. D. Sinclair.....		32	31	3						2			1
Elgin.....	F. D. Sinclair.....		22	21			2				1			
Grandview Heights.....	F. D. Sinclair.....		34	31	2						5		3	
Hall's Prairie.....	F. D. Sinclair.....		88	79	10		1			2	10		2	1
Hjorth Road.....	F. D. Sinclair.....		27	26	3						3		1	1
Johnston Road.....	F. D. Sinclair.....		51	44	6		3				10		1	
Kensington, East.....	F. D. Sinclair.....		46	44	2		2				4		2	2
Kensington Prairie.....	F. D. Sinclair.....		48	45	4		3				1			1
Newton.....	F. D. Sinclair.....		115	108	5		5				3	2	4	4
Port Kells.....	F. D. Sinclair.....		61	55	5		2		1		10	2	5	3
Port Mann.....	F. D. Sinclair.....		34	31			8							2
Strawberry Hill.....	F. D. Sinclair.....		53	53			5				1			1
Surrey Centre.....	F. D. Sinclair.....		28	26	4		2		1		3		3	1
Tyne Head.....	F. D. Sinclair.....		60	50	2		1			1	8		4	3
Westminster, South.....	F. D. Sinclair.....		153	137	4		9				2	3	7	6
White Rock.....	F. D. Sinclair.....		155	150	5		10				19	2	6	2
Woodward's Hill.....	F. D. Sinclair.....		37	33	2		1			1	1	1		
Vancouver, West:														
Capilano Intake.....	A. C. Nash.....		5	5								3	1	
Dundarave.....	A. C. Nash.....		58	48							9	29	12	
Hollyburn.....	A. C. Nash.....		297	283		1	3				48	155	22	3
Pauline Johnson.....	A. C. Nash.....		356	331			1	1			71	135	23	1

RURAL AND

Abbotsford.....	J. M. McDiarmid.....		215	196	9		12		12	19	21	17	14	5
Adelphi.....	K. Terry.....		11	10			2				4		3	
Ainsworth.....	D. J. Barclay.....		14	12	1		1		5	5	6	4	1	8
Albert Canyon.....	A. L. Jones.....		15	15		2	1		1		1	2		1

SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
T.B. adenitis, 1; cardiac, 4; cong. torticollis; T.B. arthritis, 1; stammering, 1; conjunctivitis, 16			3		Mumps, 1		
Postural, 3; harelip, 1; cardiac, 1			5		Mumps, 14; German measles, 1; chicken-pox, 18		
Strabismus, 1; cong. torticollis, 1			2		Whooping-cough, 13		
Conjunctivitis, 15; cardiac, 2			2		Whooping-cough, 7; chicken-pox, 1		
Cardiac, 13; strabismus, 1; dextrocardia, 1; pulmonary, 1; conjunctivitis, 1		2	7	2	Mumps, 6; chicken-pox, 19; whooping-cough, 3		
Strabismus, 6; cardiac, 9; myasthenia, 1		2	3	1	Mumps, 1; German measles, 1; chicken-pox, 4; whooping-cough, 1		
						Good	Good.
						Crowded	Good.
Orthopædic, 3; cleft palate, 1						Good	Good.
Orthopædic, 1						Good	Good.
						Good	Good.
						Good	Good.
						Good	Good.
Angioma of throat, 1; chronic sinusitis, 1; scoliosis, 1; chronic bronchitis, 1; defective speech, 1; cardiac disease, 6; blepharitis, 1; corneal opacity, 1; kyphosis, 1							Good.
Acne, 4; anæmia, 11; cardiac, 1; eczema, 4; nervous, 3			27		Whooping-cough; chicken-pox	Good; frame on concrete; standard construction	Yes.
Functional systolic					Mumps; measles	Poor	Fair.
		1			Chicken-pox; whooping-cough; mumps; measles	Good	Fair.
Endocarditis, 2; anæmia, 2; pigeon-chest, 1; chronic poliomyelitis, 1					Measles; mumps; chicken-pox	Good	Good.
					Chicken-pox	Good	Good.
Functional systolic					Mumps	Good	Good.
					Chicken-pox; mumps; measles	Good	Fair.
Impediment in speech, 1; functional systolic		2			Mumps; measles	Good	Fair.
		1			Scarlet fever, 2; mumps	Good	Good.
Endocarditis, 2; defective palate, 1; loss of weight, 1; anæmia, 1					Mumps	Good	Fair.
Chronic poliomyelitis, 1					Chicken-pox; mumps; measles	Good	Fair.
		3	3		Mumps	Good	Fair.
Alopecia, 1; anæmia, 1		3			Mumps; chicken-pox, measles	Good	Fair.
Epilepsy, 1		1			Measles; mumps; chicken-pox	Good	Fair.
Impediment in speech, 1; malformation, 1					Measles	Good	Fair.
Mitral systolic, 1; D.A.H., 1; marginal blepharitis, 1		8	1		Mumps; chicken-pox	Good	Fair.
					Chicken-pox; mumps; measles	Poor	Fair.
Pigeon-chest, 1; foreign body in ear, 1; deviated septum, 1; functional systolic, 1					Mumps; measles	Good	Fair.
Strabismus, 1; functional systolic, 2					Measles; mumps chicken-pox	Good	Good.
Spinal deformity, 1; cleft palate, 1; functional systolic, 1; endocarditis, 1		10	20		Measles; mumps; chicken-pox	Good	Good.
Foreign body in ear, 1					Mumps; measles	Good	Fair.
						Good	Both.
						Good	Both.
Skin, trouble, 2						Good	Both.
						Good	Both.

ASSISTED SCHOOLS.

							Good condition.
						Good	Good.
Cervicle adenitis, 1						Poorly heated and ventilated	Poor.
Birth paralysis, 1						Rather crowded; ventilation fair only	Yes.

RURAL AND

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Albert Head.....	I. B. Hudson.....	Miss H. Kelly.....	13	13			1		1	1	2	1		
Alert Bay.....	I. Haramija.....		55	53			1		4	4	4	10	1	1
Alexander Manson.....	T. C. Holmes.....		13	12			2	1		2	2	3	2	2
Alexis Creek.....	G. A. Charter.....		9	9					1			1		
Aleza Lake.....	J. T. Steele.....		29	29			2		6	6	6	4	5	5
Alice Arm.....	D. R. Learoyd.....		16	16						1	1	3	5	2
Alice Siding.....	G. B. Henderson.....		25	22			3			1	3	6		
Allenby.....	R. S. Manson.....		49	44			2			2	5	14		1
Allen Grove.....	R. B. White.....		12	12	1	1	1		2		3	3		
Anarchist Mountain.....	W. H. Wood.....		11	11			3				3		7	10
Anderson Creek.....	R. W. Irving.....		8	8			2			2	2			1
Anglemont.....	W. Scatchard.....		14	13			1			1	1	6		2
Annable.....	J. H. Palmer.....		25	21				1		1	3	14	3	2
Appledale.....	H. H. MacKenzie.....		16	15										
Argenta.....	D. J. Barclay.....		7	7			1		1	1	4	4		5
Arrowhead.....	A. L. Jones.....		18	18							4	6		
Arrow Park, East.....	H. F. Tyerman.....		12	12		1	2		1	4	4	2		
Arrow Park, West.....	H. F. Tyerman.....		12	12		1	1		3	3	4	4		
Ashcroft.....	R. Gibson.....		104	102			2	1		19	37	21	24	7
Ashton Creek.....	H. W. Keith.....		20	20			2		1	1	2	2		1
Aspen Grove.....	G. H. Tutill.....		10	10							1	5	4	
Athalmer-Invermere.....	F. E. Coy.....		97	93	5	3	6		5	5	5	23	3	
Atlin.....	C. H. Playart.....		16	14	2	1	2		2	3	2	10	1	1
Australian.....	G. Baker.....		10	9			1				1			
Avola.....	J. H. Shotton.....		8	8	1		1		2	2	2	6	1	1
Bainbridge.....	A. D. Morgan.....		15	15							3	5		3
Balfour.....	D. J. Barclay.....		24	22			1		7	7	9	2		8
Balmoral.....	W. Scatchard.....		10	9						2	2	4		2
Bamberton.....	F. T. Stanier.....	Miss B. Mitchell.....	20	18			2			2	3	10		
Bamfield.....	Guy Palmer.....		29	28			4		3	3	3	5		4
Barkerville.....	Gerald Baker.....		11	11			1						1	
Barnston Island.....	G. Morse.....		19	18	5		1				6	8	2	1
Barriere.....	C. J. M. Willoughby.....		8	8	4		2				1	3	4	3
Barriere Forks.....	C. J. M. Willoughby.....		10	10		1	3				2	1	3	5
Baynes Lake.....	H. A. Christie.....		28	28			2				3	13		
Beale's Quarries.....	G. E. Darby.....		7	7			1			5	4	5	3	1
Beaton.....	A. L. Jones.....		15	15			1				2	4		
Beaver Creek.....	A. D. Morgan.....		19	17							4	4		6
Beaver Cove.....	I. Haramija.....		24	24				1	4	4	3	10		1
Beaverdell.....	W. H. Wood.....		17	17			3				7	9	11	5
Beaver Point.....	E. M. Sutherland.....		11	11							1	2	1	
Beaver River.....	M. F. Lucas.....		9	9							1	3		
Begbie.....	A. L. Jones.....		10	10			1					3		1
Belford.....	H. H. MacKenzie.....		16	16		1					3	5		10
Bella Coola.....	H. A. McLean.....		33	33	6		1	2	3	17	17	22	17	16
Bella Coola, Lower.....	H. A. McLean.....		24	24	10		5	2	10	11	11	7	10	6
Bench.....	F. T. Stanier.....	Cowichan Health Centre	21	17			1			2	3	6	3	
Bend.....	M. F. Lucas.....		16	16					2	2	3	4	1	2
Beresford.....	R. W. Irving.....		8	6										
Bevan.....	T. A. Briggs.....		43	41			2	3	8	10	10	17		2
Big Bar Mountain.....	R. Gibson.....		10	8			1			2	4	1	2	1
Big Creek.....	G. A. Charter.....		8	8			1				2			
Big Eddy.....	A. L. Jones.....		19	19			2					6		6
Big Lake.....	A. K. Connolly.....		9	5	2	1						2		
Birch Island.....	M. G. Archibald.....		17	16			2		1	3	3	6	6	
Birken.....	N. J. Paul.....		9	9			1		1	1	1	4		
Black Canyon.....	R. Gibson.....		9	8						6	6	2		
Black Creek.....	A. K. Connolly.....		7	7			2							
Blackpool.....	K. Terry.....		16	16	2					1	6	7	9	
Blakeburn.....	J. E. Whitworth.....		100	97	2	1	5	3	10	12	14	30	7	1
Blind Bay.....	W. Scatchard.....		16	14						5	5	8		5
Blind Channel.....	A. W. McCordick.....		7	7								1		
Bloedel.....	R. E. Ziegler.....		20	19		2			2	2	2	3		
Blubber Bay.....	T. H. Lougheed.....		34	34			2			2	4	6	3	2
Blucher Hall.....	K. Terry.....		13	13			3				8	9	5	8
Blue River.....	Thos. O'Hagan.....		24	24					4	4	4	6		
Bonaparte.....	R. Gibson.....		7	7			1			1	2	3	2	4
Bonchie.....	G. R. Baker.....		8	8		1	1		1	1			1	
Bonnington Falls.....	H. H. MacKenzie.....		23	17			1		1		3	6		
Boston Bar.....	A. E. Kydd.....		16	16	2						4	18	7	
Boswell.....	G. B. Henderson.....		14	11			1			2	3	2		1

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Tachycardia, 1						Lighting poor..... Good..... Good..... Not crowded; well ventilated and heated Fair..... Satisfactory..... Good..... Good..... Number of desks need readjusting Satisfactory..... Good..... Fair..... Measles..... Measles, 2; chicken-pox, 2..... Good..... Fair..... Measles..... Measles..... Measles.....	Clean; adequate. Clean. Two; clean. Clean; adequate. Fair. Yes. Clean; adequate. Clean; adequate. Yes. Yes. Two; clean. Require repairs. Yes. Two; clean; adequate. Fair. Yes. Yes. Yes. Fair. Clean; adequate.
Orthopædic, 1						Crowded..... Satisfactory..... Good..... Poorly heated and lighted Good..... Poorly ventilated.....	Yes. O.K. O.K. Yes. Clean; adequate.
Chorea, 1						Good.....	Yes.
Eczema, 1						Poorly ventilated.....	Clean; adequate.
Anæmic, 1						Good..... Satisfactory..... Good..... Neither..... Good..... Good..... Good..... Satisfactory..... Satisfactory..... Satisfactory..... Adequate..... Mumps..... Good..... Good..... Satisfactory..... Satisfactory..... Good..... Good..... Good..... Good..... Satisfactory..... Satisfactory..... Good..... Good..... Good..... Good..... Satisfactory..... Wooden building in good repair Good.....	Good. Yes. Good. Yes. Yes. Good. O.K. O.K. Clean; adequate. Adequate. Yes. Good. Clean. Yes. Adequate. Clean; adequate. Yes. Two pits full. Fair. Fair. Good. Clean; adequate. Two; clean. Adequate. Clean; adequate. Clean; adequate. Yes. Clean; adequate. Clean; adequate. O.K. O.K. Good. Yes. Fair. Adequate. Well kept.
Poor posture, 3; malocclusion of teeth, 1						Good.....	Yes.
Pulmonary, 1						Good..... Satisfactory.....	Clean; adequate. Clean; adequate.
Influenza						O.K.....	O.K.
Valvular murmur, 1					1 Influenza, 4; septic throat, 4; scarlet fever, 8	Good..... Satisfactory..... Good..... Good..... Not crowded; well heated and venti- lated	Good. Yes. Fair. Adequate. Well kept.
Deformed left arm, 1						Clean; well venti- lated Good..... Good..... Good..... Measles, 2; scarlet fever, 4..... Everything fine..... Good.....	Adequate. Clean; adequate. Yes. Clean; adequate. Clean; adequate. Clean; adequate.

RURAL AND

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Boundary Falls.....	W. H. Wood.....	.....	15	15	.....	.....	3	1	.....	.....	7	6	12	10
Bowen Island.....	F. Inglis.....	.....	22	20	.....	.....	.....	1	.....	4	4	10	1	.....
Bowie.....	A. L. Jones.....	.....	15	15	.....	.....	2	.....	1	1	2	5	.....	.....
Bowser.....	J. E. Knipfel.....	.....	18	18	7	1	3	1	7	5	8	12	5	.....
Box Lake.....	H. F. Tyerman.....	.....	24	22	1	1	2	.....	.....	8	8	2	1	1
Brackendale.....	N. J. Paul.....	.....	26	26	1	1	1	.....	2	2	4	10	2	1
Brechin.....	O. G. Ingham.....	.....	116	114	4	8	2	2	1	3	30	38	9	8
Bridesville.....	W. H. Wood.....	.....	9	9	.....	.....	1	.....	.....	.....	5	6	8	7
Bridge Lake.....	R. Gibson.....	.....	9	9	.....	.....	1	1	1	3	3	2	1	.....
Bridge River.....	J. C. Stuart.....	.....	20	19	.....	.....	.....	.....	.....	.....	2	9	2	2
Brigade Lake.....	R. W. Irving.....	.....	12	11	.....	.....	1	.....	.....	7	7	2	.....	1
Brilliant.....	J. H. Palmer.....	.....	129	119	.....	4	6	1	2	2	8	56	8	36
Brisco.....	F. E. Coy.....	.....	18	15	.....	.....	3	.....	.....	.....	.....	5	.....	.....
Britannia Beach.....	J. W. Laing.....	.....	61	61	4	.....	2	1	5	3	21	34	21	4
Britannia Mine.....	J. W. Laing.....	.....	121	118	27	5	9	1	15	15	31	53	74	14
Brookmere.....	G. H. Tutill.....	.....	19	19	.....	.....	.....	.....	1	1	2	8	6	1
Brown Creek.....	W. Truax.....	.....	11	11	.....	.....	2	.....	.....	.....	.....	2	2	2
Buffalo Creek.....	A. K. Connolly.....	.....	9	7	.....	.....	.....	.....	.....	.....	.....	3	.....	.....
Bull River.....	H. A. Christie.....	.....	38	38	.....	.....	2	.....	5	3	1	18	.....	2
Burgoyne Bay.....	E. M. Sutherland.....	.....	14	14	.....	.....	.....	.....	1	1	.....	5	.....	1
Burns Lake.....	T. C. Holmes.....	.....	58	58	19	6	4	.....	4	9	23	41	10	26
Burtendale.....	H. F. Tyerman.....	.....	36	36	.....	.....	8	.....	4	8	8	6	.....	1
Cahilty.....	M. G. Archibald.....	.....	6	6	.....	.....	1	.....	.....	1	1	1	1	.....
Campbell Creek.....	K. Terry.....	.....	9	6	.....	.....	.....	.....	.....	.....	4	1	2	.....
Campbell Falls.....	R. Ziegler.....	.....	9	9	.....	.....	.....	.....	1	1	1	1	.....	1
Campbell Ranch.....	R. W. Irving.....	.....	6	6	.....	.....	2	.....	.....	.....	.....	.....	.....	.....
Campbell River.....	R. E. Ziegler.....	.....	65	63	.....	1	1	.....	8	8	8	5	2	2
Camp No. 3.....	T. A. Briggs.....	.....	24	24	.....	.....	1	1	6	6	6	4	.....	.....
Canal Flats.....	F. E. Coy.....	.....	29	26	.....	.....	.....	.....	.....	.....	.....	11	.....	.....
Canyon City.....	G. B. Henderson.....	.....	49	48	2	1	5	1	1	5	10	14	.....	6
Carlin.....	E. Buckell.....	.....	20	15	.....	.....	.....	.....	.....	.....	1	5	.....	1
Carroll's Landing.....	H. F. Tyerman.....	.....	12	12	.....	.....	1	.....	.....	3	3	4	1	1
Carson.....	W. Truax.....	.....	30	30	6	1	1	.....	2	1	6	12	6	4
Cartier.....	A. L. Jones.....	.....	22	22	.....	1	1	.....	.....	.....	2	4	.....	9
Cascade.....	W. Truax.....	.....	11	11	.....	.....	.....	.....	.....	.....	1	3	1	1
Cassidy.....	H. B. Maxwell.....	Miss H. Peters.....	62	60	1	.....	7	1	4	4	18	31	.....	9
Castledale.....	P. Ewert.....	.....	9	9	2	.....	2	.....	.....	.....	2	1	1	.....
Castlegar.....	J. H. Palmer.....	.....	79	77	.....	.....	5	.....	.....	.....	10	53	10	3
Castle Rock.....	G. Baker.....	.....	15	14	.....	.....	1	.....	.....	.....	3	1	.....	.....
Cawston.....	L. G. D'Easum.....	Mrs. B. Thompson.....	26	21	2	1	.....	.....	.....	2	7	4	4	1
Cedar, East.....	O. G. Ingham.....	.....	11	11	1	1	.....	.....	.....	3	2	4	.....	2
Cedar, North.....	O. G. Ingham.....	.....	47	45	.....	6	2	.....	1	4	2	5	7	1
Cedar, South.....	O. G. Ingham.....	.....	18	18	3	4	.....	.....	2	.....	2	5	1	.....
Cedarvale.....	Vernon Ardagh.....	.....	14	12	1	.....	.....	.....	.....	.....	.....	6	.....	.....
Celista.....	W. Scatchard.....	.....	18	15	.....	.....	2	.....	.....	3	3	4	1	1
Champion Creek.....	J. H. Palmer.....	.....	21	20	1	.....	3	2	.....	.....	.....	14	.....	8
Chapman Creek.....	J. F. Haszard.....	.....	39	39	1	2	1	.....	4	4	10	10	3	1
Chase.....	W. Scatchard.....	.....	90	88	.....	.....	5	.....	.....	20	20	45	1	16
Chase Creek.....	W. Scatchard.....	.....	19	15	.....	.....	.....	.....	.....	4	4	11	1	1
Chase River.....	H. B. Maxwell.....	Miss H. Peters.....	56	50	1	.....	1	3	6	6	23	19	.....	4
Cherry Creek.....	A. D. Morgan.....	.....	12	12	.....	.....	.....	.....	.....	.....	2	5	.....	5
Chezacut.....	G. A. Charter.....	.....	12	10	.....	1	2	.....	1	1	2	.....	.....	.....
Chilco.....	W. R. Stone.....	.....	18	18	.....	.....	6	.....	3	3	3	8	.....	.....
Chilliwack River.....	W. E. Henderson.....	.....	9	9	.....	.....	.....	.....	.....	1	1	1	.....	1
Chimney Creek.....	A. K. Connolly.....	.....	7	6	.....	.....	1	.....	.....	.....	2	1	.....	.....
Chinook Cove.....	H. L. Burris.....	.....	16	15	.....	.....	2	.....	.....	.....	4	.....	.....	2
Christian Valley.....	W. H. Wood.....	.....	13	12	.....	.....	.....	.....	.....	.....	5	2	3	8
Christina Lake.....	W. Truax.....	.....	16	16	.....	.....	2	.....	.....	.....	.....	2	2	.....
Chu Chua.....	K. Terry.....	.....	11	11	.....	.....	5	.....	.....	1	6	4	3	.....
Clayoquot.....	D. S. Dixson.....	.....	56	56	3	.....	2	.....	2	.....	11	19	5	.....
Clearwater.....	M. G. Archibald.....	.....	12	12	.....	.....	.....	.....	.....	.....	.....	6	4	2
Clinton.....	R. Gibson.....	.....	35	32	1	.....	4	1	.....	11	11	6	11	5
Coal Creek.....	W. Workman.....	.....	75	75	3	1	12	3	3	6	7	19	4	7
Coalmont.....	J. E. Whitworth.....	.....	45	43	2	.....	1	.....	4	4	7	13	6	1
Cobble Hill.....	F. T. Stanier.....	Cowichan Health Centre.....	28	25	1	.....	3	.....	.....	1	5	6	1	2
Cokato.....	D. Corsan.....	.....	9	7	.....	.....	.....	.....	.....	.....	3	5	.....	1
Colleymount.....	T. C. Holmes.....	.....	6	6	.....	.....	.....	.....	.....	.....	.....	1	1	1

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
						Satisfactory.....	Yes.
						Good.....	Yes.
						Good.....	No.
Epileptic, 1			1		Whooping-cough; mumps	Fair; some crowd- ing; poor system for ventilation; wood box stove	Fair.
Nervous, 1					Measles	Good.....	Yes.
Congenital heart, 1						Good.....	Yes.
Cardiac, 2					Mumps	Good.....	Clean.
						Satisfactory.....	Yes.
						Good.....	Clean; adequate.
						Good.....	Good.
Heart-disease, 1; round shoulders, 1; orthopaedic, 1; anæmia, 1; chorea, 1			3		Measles, 3	Good.....	Two; clean.
Anæmia, 1; bronchitis, 1			2		Whooping-cough, 10; scarlet fever, 1; measles, 2	Good.....	O.K.
Cardiac, 8; nervous, 1; skin-disease, 1					Whooping-cough, 2	Crowded.....	Should be kept cleaner.
						Satisfactory.....	Clean; adequate.
						Good.....	Yes.
						Satisfactory.....	Two; clean.
						Satisfactory.....	Clean; adequate.
						Satisfactory.....	Clean; adequate.
	2				German measles, 7; chicken-pox, 1; scarlet fever, 1	Good.....	Clean; adequate.
	2				Measles	Good.....	Two; clean.
						Good.....	Yes.
					Pertussis	Good.....	Good.
						Good.....	Adequate.
				1		Good.....	Two; clean.
Orthopaedic, 1						Good.....	Adequate.
						Good.....	Adequate.
						Good.....	O.K.
Icthyosis, 1					Mumps	Good.....	Clean; adequate.
						Satisfactory.....	Yes.
					Measles	Fair.....	Yes.
						Good.....	Two; clean.
					Mumps, diphtheria, 1	Good.....	Yes.
						Good.....	Two; clean.
Defective chest, 3; old injury to wrist, 1					Infantile paralysis	Very poor.....	Fair.
Deformity, 1					Mumps, 5	Good.....	Inadequate.
Round shoulders, 3; orthopaedic, 1; anæmia, 1							Yes.
			2			Good.....	Good.
						Not crowded; venti- lation good	Yes.
					Measles	Good.....	Clean.
					Measles	Good.....	Clean.
					Chicken-pox	Good.....	Clean.
Rheumatic and cardiac, 2						Very good.....	Earth; yes.
						Satisfactory.....	Yes.
Frohlich's disease, 1		4				Good.....	No.
					Chicken-pox, 2	Satisfactory.....	Yes.
						Satisfactory.....	Yes.
			3		Chronic mastoid, 1	Efficient.....	Fair.
						Good.....	Good.
					Scarlet fever	Ventilation not good	Clean; adequate.
						Good.....	Yes.
			3			Good.....	Good.
						Satisfactory.....	Clean; adequate.
						Overcrowded.....	O.K.
						Satisfactory.....	Yes.
						Good.....	Two; fair.
Catarrhal throat, 1; cardiac, 1; defec- tive posture, 3						Accommodation; ventilation and heating	Clean; adequate.
Diseased gums, 2; poor posture, 3						Log building; good repair; good light- ing	
					Measles	Good.....	Clean; adequate.
Nervous, 3; cardiac, 2; pulmonary, 3				2	Scarlet fever, 5; chicken-pox, 3; mumps, 16; measles, 5	Fair.....	Fair.
					Scarlet fever, 11; measles, 1; whooping-cough, 1	Good.....	Good.
Spinal curvature, 1						Good.....	Good.
Cardiac, 1					Rubella, 1	Good.....	Clean.
						Fairly good.....	Two; clean.

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Backward, 1; cardiac, 2; orthopædic, 1					Measles, 10	Satisfactory	Yes. Excellent.
V.D.H., 1; asthma, 1; St. Vitus's dance, 1; ichthyosis, 1		1				Crowded	Adequate.
						Good	Good.
						Good	Clean; adequate.
Cardiac, 2; nervous, 4; pulmonary, 3		10	6		Chicken-pox; mumps Scarlet fever, 3; mumps, 6; measles, 6	Good	Good.
Flat feet, 1; cleft palate, 1						Good	Good.
						Good	Yes.
T.B. knee, 1; squint, 1						Good	Good.
Eczema, 1						Good	Clean; adequate.
Eczema, 1; defective speech, 1						Good	Clean; adequate.
						Good	Clean; adequate.
						Poor repair	Poor.
					Chicken-pox; measles	Good	Good.
			1			Good	Clean; adequate.
						Good	Good.
Anæmia, 1						Good	Clean; adequate.
					Measles	Fair	O.K.
						Fair	Fair.
						Good	Fair.
						Good	Two; clean.
						Satisfactory	Clean; adequate.
						Good	Yes.
					Measles	Fair	Yes.
					Intestinal influenza	Well ventilated; heated; not over- crowded	Two; sanitary.
						Good	Clean.
					Mumps	Satisfactory	Yes.
Valvular heart, 2		2				Satisfactory	Yes.
					Mastoid operation, 1	Efficient	Yes.
					Pertussis	Satisfactory	Adequate.
						Satisfactory	Clean; adequate.
						Good	Clean; adequate.
				1		O.K.	O.K.
						Good	Earth; yes.
						Heating, etc., good	Fair.
						Satisfactory	Clean; adequate.
Orthopædic, 1			1			Good	Adequate.
						Good	Yes.
			1		Measles	Good	Two; clean.
						Good	Clean; adequate.
						Good	Yes.
	1				Varicella	Satisfactory	Yes.
						Good	Clean.
Mitral stenosis, 1; curvature of spine and rickets, 1						Fairly satisfactory	O.K.
						Good	Yes.
						Good	Two; clean.
						Fair	Fair.
Slight cardiac, 1						Fair	Clean.
					Chicken-pox	Fair	Yes.
						Good	
Anæmia, 3; pulmonary, 3						Satisfactory	Clean; adequate.
						Heating, etc., good	Yes.
						Good	Good.
						Good	Yes.
						Good	Clean.
						Satisfactory	Clean; adequate.
Endocarditis, 1						Good	Clean; adequate.
						Not crowded; well heated and venti- lated	Clean; adequate.
						Good	Yes.
Scoliosis, 2					Whooping-cough	Good	Good.
Defective chests, 2; cardiac, 1		5			Whooping-cough, 6	Efficient	Very bad.
						Good	Yes.
Cardiac, 2; pulmonary disease, 1; every child in school has a cold, explaining high percentage of enlarged cervical glands		2				Overcrowded	Clean.
					Influenza	Well heated and ventilated; not overcrowded	Two; sanitary.

RURAL AND

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Fauquier.....	J. E. H. Kelso.....		11	11		1	3					2		
Field.....	Geo. Cheeseman.....		76	76		2	5			4	7	9		
Fife.....	W. Truax.....		15	15	1						1	3	1	1
Firvale.....	H. A. McLean.....		9	9			2		1	3	4		4	2
Flagstone.....	H. A. Christie.....		12	12			1		3	1	1	7		
Florence Mine.....	D. J. Barclay.....		12	12					3	3	7	7		5
Foch.....	A. Henderson.....		13	13		1					4	1		1
Forestdale.....	T. C. Holmes.....		8	8	2		1		2	3	5	5		5
Forest Grove.....	A. K. Connolly.....		12	9							1	2		
Ford.....	Paul Ewert.....		8	8			1							2
Fort Fraser.....	D. B. Lazier.....		45	45			2			12	14			4
Fort George.....	C. Ewert.....		37	37	1	1	2	2	3			17		2
Fort George, South.....	C. Ewert.....		70	64	3	2	10		3	3	10	25		6
Fort St. James.....	W. R. Stone.....		16	16	1		2		1	1	2	7		
Fort Steele.....	F. W. Green.....		49	42		1	2			1	6	9		9
Four Mile.....	L. B. Wrinch.....		8	7			1		1	1	2	4		1
Francois Lake.....	T. C. Holmes.....		11	11	4		2		3	3	5	6	9	6
Francois, South.....	T. C. Holmes.....		12	7	1	1	2		3	3	4	5	4	4
Fraser Flats.....	C. Ewert.....		16	14		1	1					4		
Fraser Lake.....	D. B. Lazier.....		26	26			1		3		8			3
Fraser Lake, North.....	D. B. Lazier.....		11	11						2	2			
French Creek.....	C. Davidson.....		46	38			2				5	11	2	
Fruitlands.....	K. Terry.....		100	86	9	1	13	1	19	23	25	29	44	
Fruitova.....	W. Truax.....		50	50	10	1	1		3	2	8	16	5	10
Fruitvale.....	J. H. Palmer.....		58	50		1	4	3		2	8	28	8	
Gabriola, East.....	O. G. Ingham.....		10	8		4			2	3	6	3	3	3
Gabriola, North.....	O. G. Ingham.....		14	14	1	1			2	3	3	6	4	2
Gabriola, South.....	O. G. Ingham.....		12	12	1	2	1		1	2	2	5		
Galena Bay.....	A. L. Jones.....		6	4										
Galena.....	P. Ewert.....		19	15			1				6	1		1
Galiano, North.....	E. M. Sutherland.....		19	17					1	1	1	5	1	
Galiano, South.....	C. H. West.....		20	19			2					1		
Galloway.....	H. A. Christie.....		8	7					1	1	1	3		
Ganges.....	E. M. Sutherland.....		60	60			1		1	1	2	16	1	
Gibson Creek.....	H. H. MacKenzie.....		16	15	1				1		8	12		2
Gill.....	A. D. Morgan.....		26	23							13	15	2	3
Giscombe.....	J. T. Steele.....		50	50					6	6	8	5	8	6
Glacier.....	A. L. Jones.....		11	11		1	1				2	2		
Glade.....	H. H. MacKenzie.....		37	31	5	1					12	9	3	9
Glenbank.....	H. F. Tyerman.....		32	32		1	1			9	9	10	1	
Glenemma.....	P. S. Tennant.....		9	9	2				3	3	2			1
Glenora.....	E. L. Garner.....	Miss B. Mitchell.....	37	30	3		1				11	23	8	1
Glenrosa.....	Wm. Buchanan.....		12	12			1				3			12
Glentanna.....	F. V. Agnew.....		13	13			2			1	2	8		
Golden.....	Paul Ewert.....		103	99	6	11	9		2	4	13	19	2	6
Goldstream.....	I. B. Hudson.....		22	22			3	3			4	1	1	
Granby Bay.....	D. R. Learoyd.....		179	167		1	12		9	2	10	20	72	29
Grandview Bench.....	H. W. Keith.....		17	17			5		4	4	11	11		1
Granite Bay.....	F. H. Stringer.....		12	12			1		1	1	5	10	2	
Grasmere.....	H. A. Christie.....		9	9					4	4	4	5		
Grassy Plains.....	T. C. Holmes.....		9	9	1				1	2	4	6	4	5
Gray Creek.....	D. J. Barclay.....		15	15				1	3	3	8	3		11
Great Central Lake.....	A. D. Morgan.....		23	22						2	8	15	1	4
Green Lake.....	R. Gibson.....		9	9						5	6	2	1	2
Greenslide.....	A. L. Jones.....		22	22			1				1	4		2
Grindrod.....	H. W. Keith.....		67	57	4		6		3	3	22	30	1	2
Hall's Landing.....	A. L. Jones.....		21	21								4		
Happy Valley.....	I. B. Hudson.....	Miss H. Kelly.....	35	35			1		2	4	7	1	2	
Hardwicke Island.....	F. H. Stringer.....		8	8			3		3	3	4	7	2	
Harewood.....	O. G. Ingham.....		241	238			6	1	5	9	25	31	10	10
Harpers Camp.....	A. K. Connolly.....		19	15			2				3			
Harrogate.....	Paul Ewert.....		9	9	2		1		1	1	3			
Harrop.....	H. H. MacKenzie.....		27	27		2	1				9	15		2
Hatzic Prairie.....	W. H. McIntyre.....		23	23	2	1	4	1	9	13	9	6	4	5
Hazelton.....	L. B. Wrinch.....		36	31			1		2	2	15	19	12	12
Hazelton, New.....	L. B. Wrinch.....		34	31	1	1	1	1	3	3	16	21	8	2
Headquarters.....	T. A. Briggs.....		24	23			2	2	7	7	7	8		
Hedley.....	L. G. D'Easum.....		45	44		4	1		2	5	10	12	5	1
Heffley Creek.....	K. Terry.....		13	13								2		1
Hendon.....	P. S. Tennant.....		13	11	2				1	4	3			

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermis.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
					Scarlet fever, 1; chicken-pox, 1	Good	Yes.
					Cardiac, 1	Crowded	O.K.
						Fair	Two; fair.
						Good	Poor.
						Satisfactory	Clean; adequate.
						Greatly improved	Good.
							O.K.
						Good	Two; clean.
						Satisfactory	Clean; adequate.
						Unfinished	Clean; adequate.
Cardiac, 1						Good	Good.
Blepharitis, 4; orthopædic, 2						Good	Clean; adequate.
					Scarlet fever	Fair	Clean; adequate.
Cardiac, 1; nervous, 1		3			Chicken-pox	Good	Yes.
Mitral insufficiency, 1						Good	Clean.
					Rheumatic fever, 1	Good	Good.
						Good	Two; clean.
Club-foot, 1; skin-disease, 1						Good	Two; clean.
						Good	Clean; adequate.
						Good	Good.
Anæmic, 2					Mumps, 2	Well ventilated and heated; not crowded	Good.
							Clean; adequate.
					Influenza, 3	O.K.	O.K.
						Good	Two; clean.
Anæmia, 1					Mumps, 1; chicken-pox, 2		Yes.
					Mumps	Good	Clean.
						Good	Clean.
					Chicken-pox	Good	Clean.
						Good	Yes.
						Good	Clean.
						Satisfactory	Adequate.
					Measles; influenza; rotheln	Good; not crowded; well ventilated and heated	Clean; adequate.
						Satisfactory	Clean; adequate.
Urinary, 1			2			Satisfactory	Adequate.
Nervous, 1						Good	Two; clean; adequate.
							Good.
						Good	Good.
Cardiac, 1; acute illness, 1						Good	Yes.
Cardiac, 1					Measles	Good	Not clean.
Pulmonary, 1; cardiac, 1						Good	Yes.
Rickets, 1			3			Poor floor	Require cleaning.
						Satisfactory	Clean; adequate.
						Ventilation and lighting poor	Insanitary and inadequate.
Deformity, 1			1			Ample	Clean.
Mastoids (recent), 3						Poor condition	Clean.
Nervous, 1; slight systolic, 1; flat chest, 4; apical murmur, 12; tachycardiac, 6						Satisfactory	Yes.
							One needs cleaning.
						Good	
						Satisfactory	Clean; adequate.
					Chicken-pox, 2	Good	Two; clean.
						Needs repairs	Poor.
					Bronchitis	Good	Good.
					Mumps	Good	Clean; adequate.
							No.
					Measles	Good	Yes.
Cardiac, 1; anæmia, 1					Chicken-pox, 6	Excellent	Satisfactory.
						Good	
Diabetic, 1; cardiac, 1					Scarlet fever	Good	Clean.
						Satisfactory	Clean; adequate.
						Good	Clean.
Spinal curvature, 1					Measles, 25	Good	Clean; adequate.
						Satisfactory	Yes.
Subacute bronchitis, 1					Measles; chicken-pox	Good	Good.
						Good	Good.
						Good	Clean; adequate.
Tachycardia, 1					Scarlet fever, 3	Not crowded; good ventilation; stove heat	Yes.
Suspicious chest, 1						Crowded	Require cleaning.

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Mitral endocarditis						Good..... Poor ventilation.....	Adequate. Excrement not covered.
Blepharitis, 1		1			Chicken-pox, 1	New school; well heated and ven- tilated Good..... Good..... Well heated and lighted; not over- crowded	Clean; adequate. Two; clean. Good. Two; sanitary.
Nearly all scholars have severe coryza.					Few cases mumps; whooping- cough, 4	Bad.....	None.
Cardiac, 1					Mumps, 15	Good..... Good..... Lighting and venti- lation poor Heating, etc., good.. Good.....	Clean. Yes. Yes. Yes.
			2			Good..... Fair..... Fair..... Satisfactory..... Good.....	Clean; adequate. Fair. Yes. Yes. Yes.
Infantile paralysis, 1 Conjunctivitis, 1; nervous, 1		2	2		Whooping-cough, 20	Excellent..... Poorly ventilated..... Satisfactory.....	Excellent. Fair. Adequate.
				1	Chicken-pox.	Satisfactory.....	Clean; adequate.
Flat feet, 2; calcium deficiency, 1					Influenza, 4 (afflicted at home)	Fair..... Satisfactory..... Satisfactory..... Good..... Not crowded; fairly well ventilated	Fair. Adequate. Yes. Both. Yes.
Epileptic, 1 (girl)					Measles, 1	Good..... Poor ventilation in winter	Clean. Clean; adequate.
			2				O.K.
Scoliosis, 1 Tachycardia, 1					Measles, 12; scarlet fever, 2 Scarlet fever, 5	Good..... Not crowded; venti- lation fair; stove heat Satisfactory..... Good..... Good..... In good condition.....	Good. Yes. Clean; adequate. Good. Clean; adequate. Yes.
Heart, 1						Satisfactory..... Fair.....	Yes. Adequate; fairly clean.
Pigeon-chest, 2; blepharitis, 2; acne, 2; enuresis, 2; undescended testicle, 1; hydrocephalis, 1; cardiac, 3; pulmonary, 2						Good..... Good..... Good..... O.K..... Good.....	Clean; adequate. Yes. Clean; adequate. Clean; adequate. Earth; yes. O.K. Two; clean.
Heart-disease, 1						Good.....	Two; not clean. Clean; adequate.
Cardiac disease, 2					Measles	Very poor building..... Fair..... Good.....	Clean; adequate. Clean; adequate. Yes.
					Measles, 3	Good.....	Clean; adequate.
Flat chest, 1 Orthopædic, 3; backward, 2			2		Mumps, 4; measles, 2 Scarlet fever	Satisfactory..... Good..... Good.....	Good. Clean. Clean.
Anæmic, 1		6				Good..... Good..... Good..... Good..... Good.....	Fair. Clean. Yes. Clean. Clean; adequate.

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Lillooet.....	J. C. Stuart.....		64	62	1	1	2	1	4	4	2	38	1	3
Lily Lake.....	D. B. Lazier.....		16	16			1			1	1			2
Lister.....	G. B. Henderson.....		30	27	3	2	3			4	8	6	1	1
Lone Butte.....	R. Gibson.....		23	22	2		3			6	12	7	7	1
Long Beach.....	H. H. Mackenzie.....		12	10							3	8		
Longworth.....	J. T. Steele.....		27	27		1	3		3	3	5	3	5	5
Longworth, South.....	J. T. Steele.....		16	17			2		4	4	4	1	3	3
Loos.....	M. F. Lucas.....		16	14							5	3	1	4
Loos, West (Snowshoe).....	M. F. Lucas.....		14	11						4	5	7	4	1
Louis Creek.....	K. Terry.....		10	10	3		3				7	2	2	3
Lower Nicola.....	G. H. Tutill.....		24	24					1	1	10	9	10	2
Lumberton.....	F. W. Green.....		42	42			4				6	5		8
Lumby.....	O. Morris.....		82	80						2	2			2
Lund.....	R. Ziegler.....		21	20				1	2	4	4	5		
Lytton.....	A. E. Kydd.....		27	27	2	2		1	2		4	40	12	1
Mabel Lake.....	O. Morris.....		9	8							1	3		
Magna Bay.....	W. Scatchard.....		17	16						6	6	9	2	1
Malakwa.....	A. L. Jones.....		56	50		1	1	1	1	1	5	9		2
Malcolm Island.....	A. W. McCordick.....		55	46			2			3	3	4		2
Mannetts Lake.....	K. Terry.....		9	9	2		1		1	1	2	1	5	
Manson's Landing.....	R. Ziegler.....		12	12					1	1	1	1		
Mapes.....	W. R. Stone.....		14	14			2		1	1	2	10		2
Mara.....	W. W. Keith.....		51	50	1	1	1	1	3	3	15	15		6
Marguerite.....	G. Baker.....		13	13	1				2	2	3		2	2
Marten Lake.....	W. R. Stone.....		10	10	2		2				3	5		
Martin Prairie.....	W. Scatchard.....		19	17			1			6	6	5		1
Marysville.....	J. Haszard.....		25	23		1	1				5	8		
Masset.....	J. C. S. Dunn.....		19	16		1					1			
Mayne Island.....	C. H. West.....		13	13			1				1	1		
Mayo.....	E. L. Garner.....	Miss A. Yates.....	44	43	2		2		3	3	19	25	27	7
Mayook.....	H. A. Christie.....		14	14					3	2	8	12		1
Meadowbrook.....	J. F. Haszard.....		8	8	1				1	3	4	4	1	
Meadow Creek.....	W. Scatchard.....		7	5				1		3	3	1		
Meadow Spur.....	J. H. Palmer.....		8	8							2	5	2	1
Meadow Valley.....	F. W. Andrew.....		8	8					3	3	3	6	1	1
Medora Creek.....	O. Morris.....		13	13							1	3		
Meldrum Creek.....	G. A. Charter.....		13	13							2	1		
Menzies Bay.....	R. E. Ziegler.....		6	6										
Menzinger Creek.....	G. R. Baker.....		12	11		1	2		1	1	2			1
Metchosin.....	I. B. Hudson.....		24	24			4	1		1	5	3	2	
Michel-Natal.....	G. F. Young.....		350	340	2	2	4	5	5	15	59	172	27	6
Midway.....	W. H. Wood.....		40	40			6	1		1	14	17	18	11
Mill Bay.....	F. T. Stanier.....	Cowichan Health Centre	29	27			4				5	6	1	
Minto.....	E. R. Hicks.....		64	61	14		5			8	30	42	9	3
Miocene.....	A. K. Connolly.....		7	7							2			
Mirror Lake.....	D. J. Barclay.....		10	8			1			1	1	3		4
Mission Creek.....	G. A. Ootmar.....		83	82	65		5			7	14	28	1	22
Moberly.....	P. Ewert.....		12	9		2	1	1			3	6		
Monte Creek.....	R. W. Irving.....		9	9						1	1	1		
Monte Lake.....	K. Terry.....		20	18	2		5				1	1	5	
Montrose.....	R. D. Nasmyth.....		6	6							1	1		
Morrissey Mines.....	D. Corsan.....		13	13			2				5	6		3
Mountain Ridge.....	P. Ewert.....		10	10			1				1	2		
Mountain View.....	M. F. Lucas.....		8	7	1							1		
Mount McPherson.....	A. L. Jones.....		9	9			1				2	1		2
Mount Olie.....	K. Terry.....		16	16	1		1				3	4	8	3
Moyase (Ta Ta Creek).....	F. W. Green.....		9	9			1				2	2		
Moyie.....	F. W. Green.....		45	44			3				5	13		11
Mud River.....	C. Ewert.....		14	13							2	4		1
McAlister.....	A. K. Connolly.....		8	8							3	1		
McBride.....	M. F. Lucas.....		64	62							5	11	1	
McConnell Creek.....	W. H. McIntyre.....		17	16	2		8	1	5	7	7	7	3	1
McKenzie.....	H. A. McLean.....		12	12					2	2	3	3	3	2
McClure.....	K. Terry.....		8	7	1		1		2	2	3	2	5	3

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermis.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Pleurisy with effusion, 1; titis media with otorrhœa, 1						Good.....	Good.
Eczema, 2						Good.....	Good.
					Measles	Good.....	Clean; adequate.
						Good.....	Clean; adequate.
						Good.....	Two; clean and adequate.
						Crowded.....	Fair.
						Satisfactory.....	Fair.
						Good.....	Clean; adequate.
Diabetic, 1						Good.....	Clean; adequate.
Heart-murmur, 1						Satisfactory.....	Yes.
Cardiac, 1						Good.....	Clean.
Valvular disease of the heart, 2						Ventilated.....	In good condition.
						Good.....	Adequate.
					Chicken-pox, 7	Light on south side.....	Clean; adequate.
						Satisfactory.....	Good condition.
Deaf and nearly dumb subsequent to meningitis, 1			6			Good.....	Yes.
							Yes.
							Good.
						Good.....	Adequate.
						Good.....	Yes.
					Measles	Good.....	Need cleaning.
						Good.....	Yes.
						Good.....	Yes.
						Satisfactory.....	Yes.
						Good.....	Yes.
						Good.....	Adequate; not clean.
						Not crowded; well ventilated; suit- ably heated	Clean; adequate.
Cardiac, 1; rickets, 2				5	Measles, 12	Satisfactory.....	Clean; adequate.
					Chicken-pox	Good.....	Yes.
						Poorly heated.....	Requires repairs.
							Yes.
					Whooping-cough	Frame; fair.....	Yes.
							Good condition.
					Measles, 1	Good.....	Clean; adequate.
						Good.....	Adequate.
Conjunctive heart, 1						Good.....	Yes.
Tachycardia, 1; stammering, 1; cal- cium deficiency, 1					Conjunctivitis, 3; some chicken- pox	Fairly good.....	Adequate.
Defective chest-wall. 2; deaf and dumb, 1; nasal deformity, 1; ortho- pædic; cardiac (light), 5				2	Diphtheria, 22; measles, 10	Good.....	Yes.
							Yes.
						Lower room crowded; needs more light	Yes.
Flail arm, 1						Good.....	Good.
					Whooping-cough	One room crowded.....	Eight closets.
						Satisfactory.....	Clean; adequate.
						Good.....	Fair.
Scoliosis, 2; cardiac, 4; small thorax, 1; congenital abnormality, 1	1			1	Diphtheria, 1	Complaints about not well cleaning school; afterwards went better	Condition of closets im- proved.
						Adequate.....	Clean.
						Good.....	Two; clean.
						Very good.....	O.K.
						Poor repair.....	Adequate; clean.
					Infantile paralysis	Good.....	Clean.
						Good.....	Clean; adequate.
						Good.....	Yes.
Nervous, 1					Flu	O.K.....	O.K.
Nervous, 1						Fair.....	Clean.
Cardiac, 1						Good.....	Clean.
						Good.....	Clean; adequate.
						Satisfactory.....	Only one toilet.
						Crowded; inadequate	Clean; adequate.
						Very poor school building in every way	Yes.
						Good.....	Good.
					Influenza	O.K.....	Two; in good con- dition.

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
						Good.....	Clean.
						Good.....	One; clean.
					Measles	Good.....	Yes.
					Measles	Good.....	Clean.
					Whooping-cough	Very good.....	O.K.
Eczema, 3; anæmia, 1					Whooping-cough	Modern; good.....	Yes.
Rickets, 1					Chicken-pox, 4	Very poor.....	Fair.
					Typhoid fever	Satisfactory.....	Clean; adequate.
						Poorly heated.....	Fair.
						Ventilation fair; stove heat	One only for boys and girls; clean.
Chronic asthma, 1						Satisfactory.....	Yes.
						Satisfactory.....	Yes.
						Good.....	Yes.
Poor posture, 1			12		Scarlet fever, 5; mumps, 3	Good.....	Good.
					Influenza, 4	Good.....	Clean.
					Mumps	Good.....	Clean.
Skin, 3; cardiac, 1; ganglion wrist, 1			1			Satisfactory.....	Clean; adequate.
						Satisfactory.....	Yes.
Orthopædic, 1; cardiac defects, 1; acne, 1						Satisfactory.....	Require repairs.
Scoliosis, 2; pulmonary, 1; cardiac, 4	2		2		Measles, 1.....	Good.....	Good.
Inguinal hernia, 1						Crowded (only one class-room	Good.
Nervous, 2						Cold in winter.....	Good.
						Not overcrowded.	Fairly clean; ade- quate.
Nervous, 2; anæmia, 1; scoliosis, 2; pulmonary, 2; cardiac, 3; paralyzed arm, 1					Measles, 2.....	Good.....	
						Not overcrowded; ventilation good; stove heat	Yes.
Asthma, 1					Whooping-cough, 25	Good.....	Yes.
						Satisfactory.....	Clean; adequate.
						Good.....	Clean; adequate.
Cardiac, 1						Good.....	Good.
						Satisfactory.....	Yes.
						Good.....	Yes.
Round shoulders, 2.....						Good.....	Good.
						Satisfactory.....	Adequate.
						Fair.....	Two; clean.
Anæmia, 1; chorea, 1.....						Well ventilated.....	Good condition.
						Not crowded; effi- cient	Fair.
Right arm amputated, 1.....						Good.....	Clean; adequate.
Tachycardia, 2 (hyperthyroid).....						Efficient.....	One; poor.
Pneumonia, 1					Chicken-pox, 5	Fair.....	Fair.
						Good.....	Earth; yes.
						Good.....	Two; clean.
Frohlich's disease, 1						Good.....	Yes.
Deformity, 2					Infantile paralysis	Good.....	Clean.
Cardiac, 3						Good.....	Two; clean; ade- quate.
						Good.....	Two; clean; ade- quate.
						Good.....	Good.
Heart-disease, 1						Good condition.....	Yes.
					Influenza	Good condition.....	Yes.
						Satisfactory.....	Adequate.
						Satisfactory.....	Yes.
Anæmia, 1						Good.....	Yes.
Heart, 1						Good.....	Two; clean; ade- quate.
						Good.....	Two; clean.
						Satisfactory.....	Yes.
						Good.....	Good.
Cardiac, 1; nervous 2.....					Influenza	Good.....	Good.
Cardiac debility, 1						Good.....	Clean; adequate.
						Good.....	Clean; adequate.
Cardiac, 1; pulmonary, 1; orthopæ- dic, 2						Satisfactory.....	Yes.
						Heating, etc., good...	Yes.
						Satisfactory.....	Clean; adequate.
			1			Satisfactory.....	Yes.
					Measles	Good.....	Two; good.
						Fair.....	Fair.
						Fair.....	Fair.

RURAL AND

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Powell River	A. Henderson		483	473	50	4	13		5	8	66	12	3	11
Prairiedale	W. R. Stone		16	16			2		1	1	2	14		2
Premier	J. Robinson		19	19	5	1	1	3		13	13	10	11	8
Princeton	R. B. Manson		254	229		2	2	2	3	9	33	72		19
Princeton, East	R. B. Manson		16	14						2	4	2		1
Procter	H. H. MacKenzie		59	59							20	28		
Qualicum Beach	C. Davidson		73	73			5			8	11	20	8	3
Qualicum, Little	C. Davidson		21	20							7	10	6	
Quatsino	G. A. Lawson		31	31			5	1	15		14	18	15	1
Queen Charlotte	G. A. C. Roberts		21	21			3				5	4	3	
Quesnel	G. R. Baker		90	87			3		2	2	9	3		
Quesnel Dam	A. K. Connolly		5	5								5		
Quick	F. V. Agnew		22	22					1	1	8	10	10	2
Read Island	R. Ziegler		13	13		1						2		
Red Gap	R. D. Naysmith		19	19			1			1	9	10	1	
Red Lake	M. G. Archibald		9	2					1	1	1	1	1	
Reiswig	O. Morris		8	6										
Renata	J. E. H. Kelso		34	32			3			1	2	5		1
Rhone	W. H. Wood		17	17			3				11	3	13	12
Riondel	D. J. Barclay		11	10					2	2	2			5
Roberts Creek, East	F. Inglis		9	9	1		2		1	6	1	6		
Robins Range	K. Terry		14	14	1		3		1	1	1	4	8	
Robson	J. E. H. Kelso		32	31	1		1				3	4		
Rock Creek	W. H. Wood		27	26			4				14	8	13	17
Rock Mountain	W. H. Wood		15	15			3				7	9	11	5
Rocky Point	I. B. Hudson		7	7					1	1	2	1	1	
Roe Lake	R. Gibson		11	11	1					1	3	5	1	
Roosville	H. A. Christie		11	10					2	2	1	5		
Rosebank	A. E. Kydd		14	14							6	14	7	
Rosebery	A. Francis		12	11			1				1		11	10
Rose Hill	R. W. Irving		8	8			1			1	1	1		
Rose Lake	T. C. Holmes		10	10	6				2	3	3	8	7	3
Round Lake	F. V. Agnew		17	17			2				3	5	7	
Round Top	H. L. Burris		10	11			2	1			1		1	
Roy	F. H. Stringer		7	7					2	2	2	3	2	
Royston	E. R. Hicks		27	26	1		4			1	4	11	4	11
Rutland	G. A. Ootmar	Mrs. Grindon	250	243	25		25	1		19	67	168	17	55
Sahtlam	E. L. Garner	Miss A. Yates	32	28	1		1		2	2	8	15	5	6
St. Elmo	W. E. Henderson		30	27						8	8	6		2
Salmo	J. H. Palmer		15	15			1				1	8	1	1
Salmon Bench	P. S. Tennant		16	14	2	1	1		2	4	5		2	
Salmon River	C. Ewert		7	7							1	5		
Salmon Valley	P. S. Tennant		11	8	4		3		1	2	3	4	2	
Sand Creek	W. Truax		5	5								1		1
Sand Creek, Big	H. A. Christie		16	16			1		1	1	1	11		
Sardon	H. A. McDonald		39	36			2			2	3	5		
Sandspit	G. A. C. Roberts		17	17						6	6	1		1
Sandwick	T. A. Briggs		16	16	1		1		3	3	3	7		
Savona	Kamloops Clinic		20	19	3		1				3	3	2	
Savona Road	K. Terry		9	8			1				3		3	
Sayward	A. W. McCordick		9	9							1	2		
Sayward, Upper	A. W. McCordick		10	10							1	1		
Seaford	R. Ziegler		10	8							1			
Sechelt	F. Inglis		15	14	1		1			5	1	5		
Shalalth	J. C. Stuart		10	10					1		1	2	1	
Shawnigan Lake	F. T. Stanier	Cowichan Health Centre	65	63						1	6	22	2	1
Shelley	J. T. Steele		21	21			1		2	2	2	1	3	3
Shearthon	T. C. Holmes		9	9	4				5	5	4	4	4	3
Shirley	I. B. Hudson		13	13				3	2	1	4	3	3	
Shoreacres	H. H. MacKenzie		51	44	9	2	1			4	17	21	4	5
Shuswap	W. Scatchard		8	7						1	1	5		
Shuswap Falls	O. Morris		18	18							1	2		

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
Pulmonary, 1; cardiac, 1; anæmia, 2; orthopædic, 3			3		Measles		O.K.
Mitral systolic murmur, 2 (no heart- disease)					Chicken-pox	Good	Yes.
Cleft palate, 1					Glandular fever, 2		Yes.
						Good	Clean; adequate.
						Good	Clean; adequate.
						Good	Two; clean; adequate.
Cardiac, 4						Well ventilated and heated	Clean; adequate.
Nervous, 2					Influenza	Crowded	Clean; adequate.
					Measles	Good	Yes.
						Good	Yes.
						Satisfactory	Closets adjoin and are poor.
Anæmia, 6						Good	Yes.
Anæmia, 1						Good	Clean; adequate.
Arthritis knee, 1						Good	O.K.
						Old log form	One.
						Well ventilated; not crowded	Good condition.
Pulmonary, 2					Measles	Overcrowded	Yes.
						Satisfactory	Yes.
						Good	Good.
						Heating, etc., good	Yes.
Rickets, 1						Good	Yes.
						Satisfactory	Yes.
						Satisfactory	Yes.
Tachycardia, 1; orthopædic, 2						Satisfactory	Adequate.
						Good	Clean; adequate.
						Satisfactory	Clean; adequate.
						No shade; light on south	Clean.
Cardiac, 1						Good	Good.
						Good	Two; clean.
						Good	Two; clean.
						Good	Yes.
						Good	Clean.
Cardiac, 13; paralysis, 3; scoliosis, 11; nervous, 2		4			Measles, 3; scarlet fever, 4; chicken-pox, 1	Good	Two; flush.
Nervous, 1			1		Measles, 12	Good	Good.
Orthopædic deformity						Good	Good.
						Heating poor	Clean.
					Influenza	Good	Clean; adequate.
						Satisfactory	Excrement not covered.
						Good	Two; clean.
						Satisfactory	Clean; adequate.
						Buildings good; ven- tilation and heat- ing good	Yes.
Word aphasia, 1						New	Yes.
					Two pupils with mumps seen in home; one contact examined in home; one pupil with in- fluenza seen in home	Good	Clean; adequate.
						Good	Good.
						Good	Clean.
						Good	Adequate.
			2			Heating, etc., good	Yes.
Asthma, 1						Fair	Fair.
						Junior school crowded	Good.
						Janitor service required	Fair.
						Good	One; clean.
Strabismus, 2; nervous, 3			3			Satisfactory build- ing; no play- ground	Need alteration.
Cardiac, 2; orthopædic, 1			1			Good	Clean; adequate.
						Satisfactory	No; dirty.
						Well ventilated; not crowded	Good condition.

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermis.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adequate.
						Grounds poor.....	Fair.
						Satisfactory.....	Yes.
Cardiac, 2; nervous, 2			1			Satisfactory.....	Clean; adequate.
Cardiac, 5						Satisfactory.....	Yes.
						Good.....	Poor.
						Good.....	Clean.
						Badly crowded.....	O.K.
						Building needs repair	Fair.
						Good.....	Clean; adequate.
						Good.....	Yes.
Heart, 1			1			Good.....	Yes.
						Crowded.....	Temporary; not adequate.
					Chicken-pox; measles.....	Crowded.....	Two; clean; adequate.
Anemia, 2; cardiac, 6		3			Chicken-pox.....	Good.....	Yes.
					Measles.....	Satisfactory.....	Clean; adequate.
Cardiac, 2; acne, 3; anemia, 2; orthopaedic, 3; calcium deficiency, 3					Chicken-pox, 25 to 30.....	Crowded.....	Yes.
Cardiac, 2; orthopaedic, 2; bronchitis, 1						Satisfactory.....	Excellent.
Orthopaedic, 1; nervous, 1						Unsuitable.....	Fair.
Atrophy, 1 (right lower limb, result of past anterior poliomyelitis)					Measles, 2	Satisfactory.....	Adequate.
						Satisfactory.....	Clean; adequate.
						Good.....	Yes.
						Good.....	Two; clean.
						Satisfactory.....	Yes.
						Satisfactory.....	Need cleaning.
						Satisfactory.....	Clean; adequate.
						Good condition.....	Good.
						Good.....	Yes.
						Two rooms are crowded	Adequate.
Nervous, 1; infantile paralysis, 1							Dry closets are clean.
							O.K.
						Good.....	Two; clean.
						Good.....	Yes.
Catarrhal throats, 5					Chicken-pox.....	Good.....	Yes.
						Not crowded; heat and ventilation satisfactory	Clean; adequate.
						Well ventilated; not crowded	Good condition.
						Good.....	Yes.
Headaches, 11							
Infantile paralysis, 1			1	3		Good.....	Good.
						Satisfactory.....	Yes.
						Good.....	Good.
						Good.....	Clean; adequate.
Nervous, 1						Good.....	Two; clean; adequate.
						Satisfactory.....	Yes.
						Satisfactory.....	Yes.
						Excellent.....	Clean; adequate.
						Good.....	Two; clean.
						Good.....	Two; clean.
					Influenza.....	Poorly heated and ventilated	No.
						Lighting and venti- lation poor	Insanitary; inade- quate.
						Good.....	Yes.
Chronic bronchitis; wry-neck; eye ulcers					Influenza	O.K.....	O.K.
						Good; ventilation O.K.	Yes.
						Poor.....	No.
Cardiac, 2						Good.....	Two; clean; ade- quate.
						Good.....	One; clean.
Chorea, 1						Heating poor.....	Yes.
					Flu; bronchitis	O.K.....	O.K.
						Good.....	Two; clean.
Valvular disease of the heart, 1							Good condition.
Epileptic, 1; valvular disease of the heart, 2; hip-joint trouble from in- fancy, 1			1	1		Good.....	Clean; adequate.
					Influenza, 3; septic throat, 1	Good.....	Good.
						Satisfactory.....	Requires repairs.

RURAL AND

Name of School.	Medical Inspector.	School Nurse.	No. of Pupils enrolled.	No. of Pupils examined.	Malnutrition.	Defective Mentality.	Defective Vision.	Defective Hearing.	Defective Nasal Breathing.	Adenoids.	Enlarged Tonsils.	Defective Teeth.	Enlarged Glands.	Goitre.
Ucluelet.....	Guy Palmer.....	.....	38	33	1		3		7	7	7	7		
Ucluelet, East.....	Guy Palmer.....	.....	18	16			3		5	5	5	6		
Underwood.....	A. D. Morgan.....	.....	14	14							2	7		2
Union Bay.....	E. R. Hicks.....	.....	62	59	13		9		4	2	8	40	10	
University Hill.....	H. W. Hill.....	Mrs. C. A. Lucas.....	90	69			1				14	48		
Usk.....	R. B. Brummitt.....	.....	18	18			3		1	6	10	5	8	2
Valdes Island.....	R. E. Ziegler.....	.....	26	26			1		5	5	5	2		1
Vallican.....	H. H. MacKenzie.....	.....	14	12			1				7	9		3
Valmont.....	Thos. O'Hagan.....	.....	21	20	1				6	6	6	7		
Vananda.....	T. H. Lougheed.....	.....	21	21			1			1	2		2	1
Vancouver Bay.....	J. A. Howard.....	.....	8	8								3		
Vanderhoof.....	W. R. Stone.....	.....	120	120	3	2	21	4	8	10	33	65		
Vavenby.....	K. Terry.....	.....	12	6	2		1				2	3	3	
Vesuvius.....	E. M. Sutherland.....	.....	26	26			2		3	3	5	10	3	
Vesuvius, North.....	E. M. Sutherland.....	.....	11	11							1	4	1	
Vinsulla.....	K. Terry.....	.....	9	8	1		2		1	1	3	2	4	3
Waldo.....	H. A. Christie.....	.....	25	23			2		7	4	7	12		
Walhachin.....	R. Gibson.....	.....	36	34	2		3		1	9	13	10	10	3
Wardner.....	H. A. Christie.....	.....	63	62			3		18	9	23	38		2
Waterloo.....	H. B. Maxwell.....	.....	34	32	3		2	1	2	2	11	21	3	4
Watch Lake.....	R. Gibson.....	.....	9	9		1				3	3	1	3	
Watmore.....	W. Scatchard.....	.....	9	8						2	2	5		2
Webber Lake.....	W. R. Stone.....	.....	9	9		1	3		2	2	4	7		
Webster.....	G. R. Baker.....	.....	9	9										1
Wellington.....	O. G. Ingham.....	.....	47	46		2				5	7	10	6	4
Wellington, East.....	O. G. Ingham.....	.....	41	40	2	3	1			4	3	8	3	3
Wellington, South.....	H. B. Maxwell.....	.....	148	130	6		7				40	42		5
Westbank.....	G. A. Ootmar.....	Mrs. Grindon.....	13	13	2		2			2	3	5		2
Westbank.....	Wm. Buchanan.....	Miss M. Twiddy.....	46	45			1		3	4	11	9		41
Westbridge.....	W. H. Wood.....	.....	6	6			2	1			2	2	2	3
Westside.....	K. Terry.....	.....	14	13	2		1		3	3	3	2	10	3
Westview.....	A. Henderson.....	.....	82	80	15	1	3		2	5	9	2		2
Westwold.....	K. Terry.....	.....	30	29	1		2	2	1		15	5	9	
Whaletown.....	R. E. Ziegler.....	.....	13	12					1	1	1	1		
White Lake.....	E. Buckell.....	.....	13	13		1					2	4		2
Whitewater.....	D. J. Barclay.....	.....	9	9					1		1	2		3
Wildwood.....	A. Henderson.....	.....	76	73	10	1	2		2	5	13	4	1	2
Williams Lake.....	A. K. Connolly.....	.....	103	99	5		9				13	31		
Willow Point.....	F. M. Auld.....	.....	31	30			1				9	13		1
Willow River.....	J. T. Steele.....	.....	31	30	2		2		1	1	4	6	5	6
Willowvale.....	W. R. Stone.....	.....	10	10			2		1	1	2	6		1
Wilmer.....	F. E. Coy.....	.....	15	14	1							3		2
Windermere.....	F. E. Coy.....	.....	24	23			1	1				7		
Winfield.....	G. A. Ootmar.....	Mrs. Grindon.....	66	63	4		4	1		8	17	30		8
Winlaw.....	H. H. MacKenzie.....	.....	56	50			5				16	31		11
Wistaria.....	T. C. Holmes.....	.....	7	7						1	1	3	1	2
Woodcock.....	V. E. R. Ardagh.....	.....	2	2								1		
Woodfibre.....	C. G. G. McLean.....	.....	87	87	1	1	13	1	3	7	21	28	6	
Woodmere.....	F. V. Agnew.....	.....	17	17	2		1				11	2	6	
Wycliffe.....	F. W. Green.....	.....	22	22		2	4				4			2
Wynndel.....	G. B. Henderson.....	.....	53	48	2		6			4	8	17		1
Yahk.....	G. B. Henderson.....	.....	91	85	2	1	8	1		8	14	14		1
Yale.....	P. S. McCaffrey.....	.....	24	23	1		3	3	11	11	11	4		4
Ymir.....	H. H. MacKenzie.....	.....	26	25	5	1	2				6	18		2
Youbou.....	E. L. Garner.....	Miss A. Yates.....	17	17	4				2	2	11	5	4	

ASSISTED SCHOOLS—Continued.

Other Conditions, specify, (Nervous, Pulmonary, Cardiac Disease, etc.).	Vermin.	Scabies.	Impetigo.	Ringworm.	Acute Fevers which have occurred during the Past Year.	Condition of Building. State if crowded, poorly ventilated, poorly heated, etc.	Closets. State if clean and adquate.
Skin, 1			1		Scarlatina, 1	Neither.....	Yes.
Cardiac, 2		1	1		Whooping-cough	Neither.....	Yes.
						Good.....	Good.
						Heating and venti- lation require at- tention	Six toilets.
Cardiac, 1						Good.....	Clean; adquate.
						Very good	Adequate.
						Crowded	One; not clean.
						Clean; fairly well ventilated	
						Not crowded; good ventilation; well heated	Two; clean; ade- quate.
Nervous, 2					Chicken-pox; scarlet fever.....	Very good.....	O.K.
Nervous, 1					Influenza	O.K.....	O.K.
					Pertussis	Satisfactory.....	Adequate.
						Satisfactory.....	Adequate.
						O.K.....	O.K.
						Satisfactory.....	Clean; adequate.
					Measles	Good.....	Clean; adequate.
Defective chest, 1; cardiac, 2						Satisfactory.....	Clean; adequate.
Nervous						Efficient.....	Yes.
						Good.....	Clean; adequate.
Cardiac, 1						Poor lighting.....	Yes.
						Good.....	Yes.
						Good.....	Good.
					Chicken-pox	Good.....	Clean; adequate.
Cardiac, 2		2	1		Chicken-pox	Good.....	Clean.
Anæmic, 1; scoliosis, 1					Chicken-pox, 13	Efficient.....	Fair.
Pneumonia, 1						Good.....	Good.
						Satisfactory.....	Yes.
Wry-neck, eye ulcers					Rheumatic fever, 1.....	Satisfactory.....	Clean; adequate.
Cardiac, 1; pharyngitis, 1			1		Scarlatina	O.K.....	O.K.
Chronic bronchitis, 1						Good.....	Good.
						Good.....	Adquate.
						Satisfactory.....	Yes.
Pulmonary, 1			6		Measles; diphtheria	Good.....	Fair.
						Old building poor; new building good	O.K.
					Measles, 3	Good.....	Girls' good; boys' fair.
						Poor ventilation.....	Two; clean; ade- quate.
						Good.....	Fair.
						Good.....	Yes.
						Good.....	O.K.
Nervous, 1; anæmic, 1; scoliosis, 3; pulmonary, 1					Measles, 4	Good.....	O.K.
Eczema, 1						Good.....	Good.
						Good.....	Two; clean; ade- quate.
Acne, 1; Dysmenorrhœa						Good.....	Two; clean.
						Good.....	Earth; yes.
						First class.....	Clean; adequate.
						Good.....	Yes.
					Mumps	Good.....	Clean.
						Good.....	Clean; adquate.
						Good.....	Clean; adequate.
Cardiac, 2; nervous, 1					Measles, 3	Good.....	Two; clean; ade- quate.
Nervous, 1; pulmonary, 2; poor pos- ture, 1		4	6		Whooping-cough, 5; mumps, 3..		

VICTORIA, B.C. :

Printed by CHARLES F. BANFIELD, Printer to the King's Most Excellent Majesty.
1930.

